Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico nergy, Minerals and Natural Resources Depart

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

I.

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

							Wall	ADI No		
Penroc Oil Corporation					Well API No. 30-025-26294					
Address					JU-UZJ-Z0Z94 V					
P.O. Boy 5970	Hobbs	MM	883	41-	5970					
Reason(s) for Filing (Check proper box)	110000			71		et (Please explo	ain)			
New Well	Ch	nange in Tra	ansporter o	f:		•	•	1. (
Recompletion	Oil	□ D ₁	ry Gas		EI	fective	Date	11/19	2	
Change in Operator	Casinghead G	ias 🔲 Ci	ondensate					1 - 7		
f change of operator give name and address of previous operator	illips I	Petro	leum	Con	many,	4001 Pe	nbrool	k St., Od	essa, TX 7976	
IL DESCRIPTION OF WELL										
Lease Name			vol Name I	includi	ng Formation		1 72: 1			
Aggie-A	"'				ANCH WOI	ECAMD.		of Lease Effected or Fee	Lease No.	
Location			MDERSC	JN K	ANCH WOL	IF CAMP	Triv.	ALAMAN OF THE		
Unit Letter R	_ :183	30 Fe	et From Ti	_{se} <u>So</u>	uth Line	and 198	<u>0</u> F	eet From TheE	ast Line	
Section 3 Townsh	ip 16-S	Rı	inge 3	2-E	, NI	ирм. L	ea		G	
						11 171,		· · · · · · · · · · · · · · · · · · ·	County	
II. DESIGNATION OF TRAN	ISPORTER (OF OIL	AND N	ATUI						
Name of Authorized Transporter of Oil	47	Condensate		ļ	Address (Giw	address to wh	ich approved	d copy of this form	is to be sens)	
Phillips Petroleum		rucks)		P.O. 1	3ox 791	, Mid]	Land, TX	79702	
Name of Authorized Transporter of Casin GPM Gas Corporatio	ighead Gas 🛛 🔯 'N	or or	Dry Gas [Address (Give	address to wh	ich approved	d come of this form	is to be sent) TX 79762	
If well produces oil or liquids, give location of tanks.	Unit Sec	: Tw	ур. 6S 3	Rge. 2E	Is gas actually Yes		When			
f this production is commingled with that	from any other le					ег:		7-23-00		
V. COMPLETION DATA		oil Well								
Designate Type of Completion	- (X)	II WEII	Gas W	EII	New Well	Workover	Deepen	Plug Back San	ne Res'v Diff Res'v	
Date Spudded	Date Compl. R	eady to Pro	xd		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	evations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Perforations										
								Depth Casing Sh	oe	
	7710	nic o	CD IC							
HOLE SIZE				ND (CEMENTIN		<u> </u>			
NOCE SIZE	CASING	G & TUBIN	IG SIZE			DEPTH SET		SACI	(S CEMENT	
				-	·					
	+			\longrightarrow		·· · · · · · · · · · · · · · · · · · ·				
	-									
. TEST DATA AND REQUES	T FOR ALL	OWARI	F					1		
IL WELL (Test must be after r late First New Oil Run To Tank	D	Ulterne Uj 10	ua ou ana	musi o	e equal to or t	xceed lop allo	wable for this	s depih or be for fu	ll 24 hours.)	
				1.7	PROMICINO MAI					
	Date of Test					noa (<i>Flow, pun</i>	np, gas lift, e	uc.)		
							np, gas lift, e			
	Tubing Pressure	 ;			Casing Pressur		np, gas lift, e	Choke Size		
ength of Test	Tubing Pressure	;			Casing Pressur		np, gas lift, e	Choke Size		
ength of Test		;					np, gas lift, e			
ength of Test	Tubing Pressure	:			Casing Pressur		np, gas lift, e	Choke Size		
ength of Test ctual Prod. During Test GAS WELL	Tubing Pressure Oil - Bbls.	;			Casing Pressur		np, gas lift, e	Choke Size		
ength of Test Lectual Prod. During Test GAS WELL	Tubing Pressure	;			Casing Pressur		np, gas lift, e	Choke Size		
ength of Test actual Prod. During Test GAS WELL actual Prod. Test - MCF/D	Tubing Pressure Oil - Bbls. Length of Test				Casing Pressur Water - Bbls.		np, gas lift, e	Choke Size Gas- MCF		
ength of Test Control Prod. During Test GAS WELL Control Prod. Test - MCF/D	Tubing Pressure Oil - Bbls.			,	Casing Pressur Water - Bbls.	e ste/MMCF	np, gas lift, e	Choke Size Gas- MCF		
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cength of Test CAS WELL Country Prod. Test - MCF/D String Method (pilot, back pr.)	Tubing Pressure Oil - Bbls. Length of Test Tubing Pressure	e (Shut-in)		,	Casing Pressur Water - Bbls. Bbls. Condense Casing Pressur	e (Shut-in)		Choke Size Gas- MCF Gravity of Conde Choke Size	n sale	
ength of Test CAS WELL Citual Prod. Test - MCF/D esting Method (pilot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and regular	Tubing Pressure Oil - Bbls. Length of Test Tubing Pressure ATE OF CO	(Shut-in) OMPLIA Conservation	ANCE	,	Casing Pressur Water - Bbls. Bbls. Condense Casing Pressur	e (Shut-in)		Choke Size Gas- MCF Gravity of Conde Choke Size	n sale	
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 4) Separate Form C-104 must be filed for each pool in multiply completed wells.