

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 03-01-83  
Page 1REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Penroc Oil Corporation	
Address P. O. Box 5970 Hobbs, New Mexico 88241	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Effective July 1, 1987

If change of ownership give name and address of previous owner Sun Exploration & Production Co. P. O. Box 1861 Midland, Texas 79702

## II. DESCRIPTION OF WELL AND LEASE

Lease Name State AF	Well No. 2	Pool Name, including Formation Vacuum Wolfcamp <i>Libre Reef</i>	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter <u>O</u> : <u>330</u> Feet From The <u>South</u> Line and <u>2130</u> Feet From The <u>East</u> Line of Section <u>8</u> Township <u>18S</u> Range <u>35E</u> , NMPN, <u>Lea</u> County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipeline Co	P. O. Box 1510 Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co <i>Libre Natl Gas</i>	P. O. Box 6666 Odessa, Texas 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? When
	0 8 18 35

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Mohammed Yamin Merchant

*Mohammed Yamin Merchant*

(Signature)

President

(Title)

July 6, 1987

(Date)

## OIL CONSERVATION DIVISION

 APPROVED \_\_\_\_\_, 19\_\_\_\_  
 BY ORIGINAL SIGNED BY JERRY SEXTON  
 DISTRICT I SUPERVISOR  
 TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.