

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITS OFFICE	

REQUEST 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)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) OCTOBER 1, 1988
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner APOLLO OIL COMPANY, P.O. BOX 1737, HOBBS, NEW MEXICO 88241

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>C. S. CAYLOR</u>	Well No. <u>3</u>	Pool Name, including Formation <u>LOVINGTON ABO</u>	Kind of Lease State, Federal or Fee <u>FEE</u>	Lease
Location				
Unit Letter <u>C</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1887</u> Feet From The <u>W</u>				
Line of Section <u>6</u> Township <u>17S</u> Range <u>37E</u> , NMPM, LEA Cour				

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)					
<u>TEXAS-NM PIPELINE COMPANY</u>	<u>BOX 2528, MIDLAND, TX. 79701</u>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>PHILLIPS PETROLEUM COMPANY</u>	<u>1160 ADAMS BLDNG., BARTLESVILLE, OK 740</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>C</u>	Sec. <u>6</u>	Twp. <u>17S</u>	Rge. <u>37E</u>	Is gas actually connected? <u>YES</u>	When <u>N/A</u>

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.

[Signature]

PRESIDENT

(Title)

OCTOBER 28, 1988

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 01 1988, 19

BY Paul Kautz
Geologist

TITLE _____

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

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

All sections of this form must be filled out completely for all able 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 conditions.

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