Signatale) President (Title) January 16, 1978 (Date)			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 allow- 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 condition. Suprate Forms C-104 must be filled for each cool in multiply	
/1. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			OIL CONSERVATION COMMISSION APPROVED . 19	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
_	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. During Test 81 bbls. total fluid	Oil-Bbis. 79	Water-Bbls. 2	Gas-MCF 47
	Length of Test 24 hrs.	Tubing Pressure	Casing Pressure 30#	Choke Size Open
Ī	OIL WELL     able for this depth or be for full 24 hours)       Date First New Oil Run To Tanks     Date of Test     Producing Method (Flow, pump, gas lift, etc.)       1/10/78     1/10/78			lift, etc.)
		OR ALLOWABLE (Test must be af	ter recovery of total volume of load oi	l and must be equal to or exceed top allow-
-  -	7_7/8"	<u>4 1/2"</u> 2 3/8"	8800' 8561'	900
┝	17"	<u>13 3/8"</u> 9 5/8"	300 <b>'</b> 2892 <b>'</b>	<u>325</u> 1600
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8606, 07, 12, 13, 14, 15, 16, 17, 18, 8638, 40, 42. 8623, 24, 30 8799' TUBING, CASING, AND CEMENTING RECORD			
ŀ		Abo 580, 81, 82, 92, 93, 94'		
	1.1/29/77 Elevations (DF, RKB, RT, GR, etc.,	1/10/78 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Date Spudcied	Date Compl. Ready to Prod.	Total Depth 8800'	P.B.T.D. 8751'
•••	Designate Type of Completic	on - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv.   Diff. Restv.
	If this production is commingled wir COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 30 17S 35E	Is gas actually connected? W NO	<sup>Then</sup> Est. Feb. 7, 1978
	Name of Authorized Transporter of Casinghead Gas 🔀 or Dry Gas 📑 Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be sent) Phillips Building, Bartlesville, OK 74003	
   	Name of Authorized Transporter of Oil 🕱 or Condensate 🗌 Navajo Crude Oil Purchasing Co.		Address (Give address to which approved copy of this form is to be sent) 501 E. Main, Artesia, N. M. 88210	
( <b>11</b> .		wnship 17 S Range TER OF OIL AND NATURAL GA	<u>35 Е , ммрм,</u>	Lea County
		O Feet From The North Lin	26 7	Lea
	Location			
41.	DESCRIPTION OF WELL AND Lease Name State-AR	Well No.         Pool Name, Including F           1         Vacuum Abo	ormation Kind of Leo	State
	and address of previous owner	DESTIMATED BELOW, IF Y NO définite de destrés	YOU DO NOT CONCUR R-5767	
	If change of ownership give name	THIS WELL HAS BEEN PL	IS OBTAINED.	·····
	New Well X Recompletion	Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	. THE NEADED AFTER	CEPTION TO R-4079
	P. O. Drawer 831, Midland, Texas 79702         Reason(s) for filing (Check proper box)         New Well         X         Change in Transporter of:             Other (Please explain)         CASINGHEAD GAS MUST NOT BE			
	PENROC OIL CORPORATION Address			
I.	PRORATION OFFICE			
	TRANSPORTER GAS OPERATOR	-		
	LAND OFFICE		AND NATURAL	. UAJ
	ILE J.S.G.S.		AND ANSPORT OIL AND NATURAL	Effective 1-1-65
	DISTRIBUTION ANTA FE	4	CONSERVATION COMMINN	Form C-104 Supersedes Old C-104 and C-11
		1		





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GIL CONSERVATION COMM. HOBBS, N. M.