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

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

State of New Mexico gy, Minerals and Natural Resources Departs Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

I. /	HEQ			ARLE AND		–	J			
Operator			NSPORT	DIL AND N	ATUHAL		I API No.			
PENROC OIL	CORPOR	ATION				ľ	30-02	5-04	1415	
Address P.O. Box 50		Hobbs	, NM o	88241-	5970					
Reason(s) for Filing (Check proper ba	r)			o	ther (Please exp	plain)				
New Well	•		Transporter of:	ו	41.					
Recompletion Change in Operator	Oil Corineba		Dry Gas	Effe	ctive No	V. 1, 19	93			
If change of operator give name	CHANGE	ad Gas 📋	Condensate	<u>.</u>						
and address of previous operator				•						
U. DESCRIPTION OF WELL Lease Name				***						
'L.C. Fopeano	deral A/c 2	Well No. 1		uding Formation 4475 7			of Lease (Federal) or Fe		Lease No.	
Location Unit Letter G	. /	980		NORTH LIE			To	(=0.	s≠ Line	
Section 35 Town	_	- (7~ ~·	мрм,	Lea			County	
III DESIGNATION OF TO	NCDODTE	D OF OU	A NITO NI A TIT	TIDAL CAG			· · · · · · · · · · · · · · · · · · ·			
III. DESIGNATION OF TRA		or Condensa			w oddress to w	hich annemy	d copy of this fo			
ECTT Energy Cor										
Name of Authorized Transporter of Cas	BOX 4666 HOUSTON TX 77210 Gold . Address (Give address to which approved copy of this form is to be sent) 4001 Pen brook, Oderia, TX 7976 7									
If well produces oil or liquids.	Unit		wp. Rge		y connected?	When		× '/9'	76 7	
give location of tanks.			2051 36E	=	yes		-1/	A		
If this production is commingled with the IV. COMPLETION DATA	Trom any other	·	ol, give commin	gling order sumi			,			
Designate Type of Completion		Oil Well	Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	. Ready to Pr	od.	Total Depth	<u> </u>	1	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Cas Pay			Tubing Depth			
erforations				<u> </u>			Depth Casing	Shoe		
		IRING C	SING AND	CENCENTIA	IC DECOD		<u> </u>			
HOLE SIZE	CAS	ING & TUBI	NG SIZE	CEMENTING RECORD DEPTH SET						
	Would a lound size				DEPTH SET			SACKS CEMENT		
										
. TEST DATA AND REQUE	T FOR AT	LOWARI	F							
IL WELL (Test must be after)	scovery of late	l volume of lo	ute nd oil and mu							
IL WELL (Test must be after that First New Oil Run To Tank	Date of Test	10.272 07 20	ad ou and magn	Producing Med	occeed top allow	vable for this	depth or be for	full 24 hour	7.)	
earth of Total				I rouseing tripe	uou (r <i>iow, pun</i>	ф. вся ідт, е:	•.)			
ength of Test	Tubing Press.	Publing Pressure			Casing Pressure			noke Size		
ctual Prod. During Test	Oil - Bbis.			Water - Bbls.			Gas- MCF			
AS WELL			 -						-	
mis Prod. Test - MCF/D	Length of Tee			Bbis. Condense	-AAAA					
				DOIS. COMMENSA	mwcr.		Oravity of Con-	en sale		
ung Method (pilot, back pr.)	Tubing Pressure (Shut-m)			Casing Pressure (Shut-in)			Choke Size			
OPERATOR CERTIFICA	TE OF C	OMPI IA	NCE							
Division have been complied with and the	ons of the Oil	Conservation	11	01	L CON	`?VA	TION DI	VISION	1	
to the time conspicate to the best of my kin	owledge and be	clief.] [_						
March Husha	w/				pproved	_		· · · · · · · · · · · · · · · · · · ·		
M.Y. Merchant President				By ORMANAL SAME OF BY JERRY SEXTON DISTRICT A DUPORVISOR						
Signature M. Y. Merchant President Printed Name 11-1093 (505)397-3596				Title						
- Care		Telephone	No.				,	4.00		

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
- 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.



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