

District I
PO Box 1900, Hobbs, NM 88241-1900
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address PENROC OIL CORPORATION 5014 CARLSBAD HIGHWAY P.O. BOX 5970 HOBBS, NM 88241-5970		OGRID Number 017213
		Reason for Filing Code CH, EFFECTIVE 06-01-96
API Number 30 - 0 25-03463	Pool Name EUMONT YATES SEVEN RIVERS QUEEN	Pool Code 22800
Property Code 011619 18986	Property Name STATE WEE	Well Number 1

II. Surface Location

UL or lot no. K	Section 13	Township 21S	Range 35E	Lot Idn	Feet from the 2310 -2180-	North/South Line S	Feet from the 2310	East/West Line W	County LEA
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Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
Lee Code S	Producing Method Code Shut In	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
		2597210	4	
		2597230	6	

IV. Produced Water

POD	POD ULSTR Location and Description
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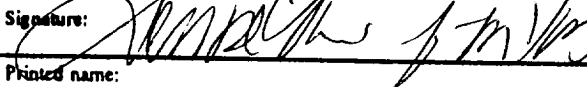
V. Well Completion Data

Spud Date	Ready Date	TD	PSTD	Perforations
Well Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Thg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOP	Test Method

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


Signature: 
Printed name: M. Y. (MERCH) MERCHANT
Title: PRESIDENT
Date: 5-29-96 Phone: (505) 397-3596

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title:
Approval Date: JUN 08 1996

"If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature:  M. Y. (MERCH) MERCHANT CONSULTING PET. ENG. 5-29-96
OGRID # 024669 WARRIOR, INC. Title Date

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

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

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

State of New Mexico
Geology, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator <u>WARRIOR, Inc % Unique Engineering</u>	Well API No. <u>30025 03463</u>
Address <u>PO Box 5970 Hobbs NM 88241-5970</u>	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Effective <u>11/1/93</u>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State WE'E' #</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>Eumont Yates SRG</u>	Kind of Lease <u>State</u> Federal or Fee	Lease No. <u>E-395</u>
Location				
Unit Letter <u>K</u>	: <u>2310</u>	Feet From The <u>West</u> Line and <u>2480</u>	Feet From The <u>South</u> Line	
Section <u>13</u>	Township <u>21S</u>	Range <u>35E</u>	NMPM	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <u>EOTT Energy Corp</u>	or <u>EOTT Energy Pipeline</u>	Address (Give address to which approved copy of this form is to be sent) <u>PO Box 4666 Houston TX 77210-4666</u>				
Name of Authorized Transporter of Casinghead Gas <u>GPM Gas Corporation</u>	or <u>Dry Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>4044 Pembroke Odessa TX 79762</u>				
If well produces oil or liquids, give location of tanks.	Unit <u>K</u>	Sec. <u>13</u>	Twp. <u>21</u>	Rge. <u>35</u>	Is gas actually connected? <u>N/A</u>	When? <u>N/A</u>

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
Mohammed Yamin Merchant
Printed Name
Mohammed Yamin Merchant
Date
11/10/93
Title
SDS 397-3596
Telephone No.

OIL CONSERVATION DIVISION

NOV 30 1993

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title

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.