

SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Penrose Production Company	
Address 1605 Commerce Building, Fort Worth, Texas 76102	
Reason(s) for filing (Check proper box) Other (Please explain)	
New Well ☐	Change in Transporter of:
Incompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner Amerada Hess Corporation, Box 591, Midland, Texas 79701

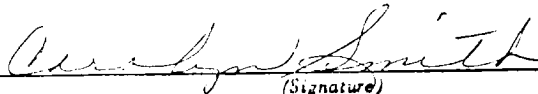
I. DESIGNATION OF WELL AND LEASE				
Lease Name State "DC"	Well No. 1	Pool Name, including Formation Penrose Skelly Grayburg	Kind of Lease State, Federal or Fee State	Lease No. B-1040
Location: Unit Letter F ; 1980 Feet From The north Line and 1876.1 Feet From The west				
Line of Section 19 Township 21S Range 37E , NMPM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas New Mexico Pipe Line Co.			Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Skelly Oil Co. Penrose Production Company			Address (Give address to which approved copy of this form is to be sent) Box 1351, Midland, Texas 79701 1605 Commerce Bldg., Fort Worth, Texas 76102			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 19	Twp. 21S	Rge. 37E	Is gas actually connected? Yes	When 12-18-62

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

III. COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res't. ☐ Diff. Res't. ☐		
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 (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 Tanks	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 TESTS			
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. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED NOV 15 1972 , 19	
 (Signature)		Orig. Signed by John Runyan Geologist	
Production Records Manager (Title)		TITLE	
November 1, 1972 (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 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.	