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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 <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Warlick	Well No. 3	Pool Name, Including Formation Blinebry R-4351	Kind of Lease State, Federal or Fee Fee	Lease No. --
Location Unit Letter P ; 660 Feet From The South Line and 330 Feet From The East Line of Section 18 Township 21S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 Midland, Texas 79301					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1650 Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 19	Twp. 21S	Rge. 37E	Is gas actually connected? Yes	When 1955

If this production is commingled with that from any other lease or pool, give commingling order number: PC-209

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 12/14/71	Date Compl. Ready to Prod. 4/24/72	Total Depth 6863'		P.B.T.D. 6721'					
Elevations (DF, RKB, RT, GR, etc.) 3498' GR	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5686'		Tubing Depth 5485'				
Perforations 56 holes from 5679' - 5873'					Depth Casing Shoe 6863'				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	13 3/8"		322'		350				
12 1/2"	9 5/8"		2523'		900				
8 3/4"	7"		6863'		725				

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 Tanks 4/29/72	Date of Test 5/1/72	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 370 psig	Casing Pressure 825 psig	Choke Size 21/64"
Actual Prod. During Test	Oil - Bbls. 99	Water - Bbls. 50	Gas - MCF 434.4

GAS WELL

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

VI. 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.

Raya Pierce
(Signature)
PRODUCTION FOREMAN
(Title)
5/4/72
(Date)

OIL CONSERVATION COMMISSION
MAY 8 1972
APPROVED _____, 19_____
BY [Signature]
TITLE SUPERVISOR DISTRICT I

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.

STEV 344

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RECEIVED

MAY 8 1972

OIL CONSERVATION COMM.
HOBBS, N. M.