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

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions

## OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

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, Operator		IO IRA	11370	JA I OIL	AITO ITA		Well A	PTNo. D-025		747	
Penroc Oil Corp	oration						3	リーレスニ	XE	ノスしノ	
Address				70							
P. O. Box 5970,	Hobbs,	NM 882	41-59	70	Oth	n (Piease expla	in)				
Reason(s) for Filing (Check proper box, New Well	,	Change in	Тимпро	rter of:	_						
Recompletion	Oil		Dry Ge		E	fective	Septemb	er 2, 19	993		
Change in Operator	Casinghor		Conden								
f change of operator give name und address of previous operator	exaco, 1	nc., P	. 0.	Box 73	O, Hobb	s, NM 882	241			·	
I. DESCRIPTION OF WEL	I. AND LE	ASE									
Lease Name		Well No.	No. Pool Name, lackuding Formation  Jalmat Yates 7 - Rivers					Kind of Lease State, Federal or Fee Lease No.			
South Langlie J	al Unit	28	Jaim	nat rate	es / - 1	110612			<del>-                                    </del>		
Location	1 (	222		<b></b> S	outh I	e andl	111 Fe	et From The _	East	Line	
Unit LetterI	:	923	_ Feet Fr	rom The	Outil Li	6 and	······································		Lea		
Section 18 Town	ship 25S	25S Range 37E			. N	, NMPM,				County	
					DAT CAC						
III. DESIGNATION OF TRA		or Conde	IL AN	D NATU	Address (Gi	ne address to wh	uch approved	copy of this fo	orm is to be a	ent)	
Name of Authorized Transporter of Oil Shell Pipeline		Of Conson			P. O.	Box 2099	, Houst	on, TX	77001		
Name of Authorized Transporter of Ca			or Dry	Gas	Address (Gr	m address to wi	uch approved	copy of this f	orm is to be s	ens)	
Sid Richardson	Carbon 8		ine C	Co		ain Stree			rx 76102	<u></u>	
If well produces oil or liquids,	Unit	Sec.	Twp	Rge.	ls gas actual Yes	ly connected?	When N/				
give location of tanks.  If this production is commingled with the second secon			rock six	ve commissi		iber:					
If this production is comminged with to IV. COMPLETION DATA	ME DOM SHY O	Miles incres or	pu, p	VV VVL			·····	<u></u>			
		Oil Wel	u T	Ges Well	New Woll	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completi	on - (X)				Total Depth	<u> </u>	J	P.B.T.D.	<u> </u>		
Date Spudded	Date Con	Date Compil. Ready to Prod.				1 town traden					
Elevations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth  Depth Casing Shoe		
Develope (Dr. ) deby (to)											
Perforations									<b>4</b> 0		
		m maio	CAST	DIC AND	CEMENT	ING RECOR	RD.				
10.5.075		TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
HOLE SIZE	<del>-  </del>	CASING & FORMS OFF									
						<u></u>					
					ļ					···	
			A DI E		<u></u>						
V. TEST DATA AND REQU	JEST FOR	ALLUN	ADUR Adload	s Lail and mus	n be equal to	or exceed top all	lowable for U	is depth or be	for full 24 ho	MF3.)	
OIL WELL (Test must be after recovery of total volume of total ou and must Date First New Oil Run To Tank Date of Test						t be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)					
Date Link lies on knn to term	W OU RUB TO TAME					Choke Size					
Length of Test	Tubing Pressure				Casing Pres	anu.					
	O'I Ph					Water - Bbis.			Gas- MCF		
Actual Prod. During Test	Oil - Bbi	18.									
GAS WELL						. — —					
Actual Prod. Test - MCF/D	Length (	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate		
		Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choka Size		
Testing Method (pitot, back pr.)	Tubing										
		<u> </u>	CDT 7 4	NCE					50.75	ON	
VL OPERATOR CERTI	FICATE C	OF COM	IPLIA	INCE		OIL CO	NSER\	/ATION	וצועוט	ON	
I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above											
Division have been complied with and that the intermeded gives and its true and complete to the best of my knowledge and belief.					Date Approved SEP 1 7 1993						
10001	10 (	7 (									
the sphear					Bv	By But Rautz					
Signature Mohammed Yamin Men	chant		Pres	ident				Geologist	-		
Printed Name	· ······	/ 5 /	Title		Tit	e					
09/15/93			elephone								
Date		ı	eschione.		11						

- 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.