<u> </u>									
Submit 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240		Energy	, Minera	State o Is and	f New Mexico Natural Resources Departm	ient		Revise	C-104 d 1-1-89
DISTRICT II P.O. Drawer DD, Aneria, NM 88210		OIL	CON	SER P.O	VATION DIVISIC		See In al Bot	structions tom of Page	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 874	10	5	Santa Fe	e, New	Mexico 87504-2088				
I.	" REC	UEST	FORA	ЦОМ	ABLE AND AUTHORI	ZATION			
Operator		10 11	ANSP	ORT	DIL AND NATURAL G	AS	API No.		
Permian Resources,	Inc., d	/b/a P	ermiar	Part	iners, Inc.		30-041	-10413	
P. O. Box 590, Mid	land, TX	7970	2						
Reason(s) for Filing (Check proper box New Well	r)	Change	in Transpo		Uther (Please expla	ain)	· · · · · · · · · · · · · · · · · · ·		·····
Recompletion	Oil Carlorad		Dry Cu	ы [Effective: (5-1-43			
If change of operator give name	0	ead Car	the second s		<u>}</u>				
IL DESCRIPTION OF WEL	I AND LE		Corg	<u> </u>					
Lesse Name		Well No	Pool N	ame, Incl	uding Formation	Kind	of Lesse		
Haley Chaveroo ØSA UN Location	N Sec 34	8			San Andres	Sure	Federal or Fee		ене Na 3935
Unit LetterH	:	1980	Feet Fr	om The	North Line and 660				
Section 34 Towns	ship 7S					F	eet From The	East	Lio
				<u>33e</u>	, NMPM,		Roosev	velt	County
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil	NSPORTI	OF Conde	DIL ANI	D NAT	URAL GAS				
Scurlock/Permian	ر لمما		~		Address (Give address to wh. Box 1183 Houst	ich approved	copy of this for	m is to be se	:n/)
Name of Authorized Transporter of Cas	inghead Gas	XX	or Dry	Gas	Address (Give address to whi	ich approved	copy of this for	.83 m is to be se	·····
If well produces oil or liquids, jvs location of tanks,	Unit	Sec.	Twp.	Re	e. Is gas actually connected?	<u>, OK 7</u>	4102		
a contraction of the state									
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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.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

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JUN 1 4 1993

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