

District I
PO Box 1980, Hobbs, NM 88241-1980
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 Chi Operating, Inc. P.O. Box 1799 Midland, Texas 79702 | | OGRID Number 4378 |
| API Number 30-041-10450 | Pool Name Chaveroo San Andres | Reason for Filing Code CH- Effective July 1, 1999 |
| Property Code 25943 | Property Name Chaveroo Haley CSA Unit | Pool Code 12049 |
| | | Well Number 14 29 |

II. Surface Location

| | | | | | | | | | |
|--------------------|---------------|----------------|--------------|---------|----------------------|---------------------------|-----------------------|------------------------|---------------------|
| UL or lot no. N | Section 34 | Township 7S | Range 33E | Lot Idn | Feet from the 990 | North/South Line South | Feet from the 1980 | East/West line West | County Roosevelt |
|--------------------|---------------|----------------|--------------|---------|----------------------|---------------------------|-----------------------|------------------------|---------------------|

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 |
| Lac Code S | Producing Method Code P | 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 |
| 167356 | Scurlock Permian Corp. P.O. Box 4648 Houston, Texas 77210 | 2071110 | O | |
| 024650 | Dynegy Midstream Services 1000 Louisiana, St. 5800 Houston, Texas 77002 | 2071130 | G | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

IV. Produced Water

| | |
|----------------|------------------------------------|
| POD 2071150 | POD ULSTR Location and Description |
|----------------|------------------------------------|

V. Well Completion Data

| | | | | |
|-----------|----------------------|-----------|--------------|--------------|
| Spud Date | Ready Date | TD | PBTD | Perforations |
| Hole Size | Casing & Tubing Size | Depth Set | Sacks Cement | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

VI. Well Test Data

| | | | | | |
|--------------|-------------------|-----------|-------------|---------------|---------------|
| Date New Oil | Gas Delivery Date | Test Date | Test Length | Tbg. Pressure | Csg. Pressure |
| Choke Size | Oil | Water | Gas | AOF | 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: *William R. Bergman*

Printed name: William R. Bergman

Title: President

Date: 8/17/99 Phone: 915-685-5001

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY

Title: GARY WINK

Approval Date: 8/18/99

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

Robert H. Marshall

Robert H. Marshall

V Pres

8/18/99

Previous Operator Signature

Printed Name

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
Energy, Minerals and Natural Resources Department

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|--|---|--------------------------------|
| Operator Permian Resources, Inc., d/b/a Permian Partners, Inc. | | Well API No. 30-041-10450 ✓ |
| Address P. O. Box 590, Midland, TX 79702 | | |
| Reason(s) for Filing (Check proper box) | | |
| New Well <input type="checkbox"/> | Other (Please explain) <input type="checkbox"/> | |
| Recompletion <input type="checkbox"/> | Change in Transporter of: <input type="checkbox"/> | |
| Change in Operator <input checked="" type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | Effective: 6-1-93 |
| | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| If change of operator give name and address of previous operator Snyder Oil Corp. | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------|---|--|------------------------|
| Lease Name Haley Chaveroo CSA UN Sec 34 | Well No. 14 | Pool Name, Including Formation Chaveroo San Andres | Kind of Lease State, Federal or Fee | Lease No. K-1369 |
| Location | | | | |
| Unit Letter N | 1980 | Feet From The West | Line and 990 | Feet From The South |
| Section 34 | Township 7S | Range 33E | NMPM, | Roosevelt County |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|---|---|--|
| Name of Authorized Transporter of Oil INJECTION WELL | <input type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Name of Authorized Transporter of Casinghead Gas | <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. |
| | Twp. | Rge. |
| | | Is gas actually connected? |
| | | When? |
| 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/M/MCF | 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
Robert Marshall Vice President
Printed Name
June 10, 1993 915/685-0113
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 22 1993
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.