Subnit 5 Copies Appropriate District Office DISTRICT I P.O. Box, 1980, Hobbs, NM 88240	State of Energy, Minerals and N	New Mexico Vatural Resources Department	Form C+104 Revised 1+1-89 See Instructions				
DISTRICT II P.O. Drawer DD, Arleda, NM 88210 DISTRICT III	STRICT II D. Drawer DD, Artecle, NM 88210 STRICT II STRICT II STRICT II OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico, 87504-2088						
1000 Rio Brizos Rd., Aziec, NM 87410 I. Operator	REQUEST FOR ALLOW		LION				
•	Inc., d/b/a Permian Par		Well API No. 30-041-10521				
P. 0. Box 590. Mid			50-041-10521				
Reaton(s) for Filing (Check proper box) New Well	Change in Transporter of:	Other (Please explain)					
Recompletion Change in Operator	Oil Dry Gas Condennate	Effective: 6743	3				
If change of operator give name and address of previous operator	Anyder sil	Ċarp					
IL. DESCRIPTION OF WELL							
Jennifer Chaveroo ØSA U	JN SEC 26 11 Character		Kind of Lesse Na State (Federal or Fee				
Location	,	San Andres	Suite recent or Hee NM 0108997-B				
Unit Letter K	Feet From The S	South Lice and 1980	Feet From The West Line				
Socion 26 Townsh	lp 7S Rauge 33E	, NMPM,					
	NSPORTER OF OIL AND NATI	URAL GAS	pproved copy of this form is to be sent)				
Scurlock/Permian Name of Authorized Transporter of Casia		<u>Box 1183</u> Houston	TY 77251 1100				
Trident NGL. Inc.	ghead Gas XXX or Dry Gas	Address (Une address to which ap	proved copy of this form is to be sent)				
If well produces oil or liquids, five location of tanks.	Unit Soc. Twp. Rge	Box 300 Tulsa Ol	0K 74102				
f this production is commingled with that V. COMPLETION DATA	from any other lease or pool, give comming	gling order number:					
Designate Type of Completion	• (X) Oil Well Gas Well	New Well Workover Do	epen Plug Back Same Res'v Diff Res'v				
Date Spudded	Date Compl. Ready to Prod.	Toul Depth					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	P.B.T.D.				
renorations			Tubing Depth				
			Depth Casing Shoe				
HOLE SIZE	CASING & TUBING SIZE	CEMENTING RECORD					
		DEPTH SET	SACKS CEMENT				
. TEST DATA AND REQUES	T FOR ALL ONLY SUP						
IL WELL (Test must be after re	I FUK ALLOWABLE	the equation of the second					
he First New Oll Run To Tank	covery of total volume of load oil and must Date of Test	Producing Method (Flow, pump, ga	for this depth or be for full 24 hours.) s lift, etc.)				
ength of Tex	Tubing Pressure						
rinal Prod. During the		Caling Pressure	Choke Size				
ctual Prod. During Test	Oil - Bbls.	Water - Bbls	Cu- MCF				
JAS WELL	· · · · · · · · · · · · · · · · · · ·	I					
ctual Prod. Text - MCF/D	Leogth of Test	Bbis. Condensate SINICF	Gravity of Condentiale				
sting Method (pilot, back pr.)	Tuding Pressure (Shui-in)	Casing Pressure (Shui-in)	Choke Size				
T OPERATOR CON-							
I OPERATOR CERTIFICA I hereby certify that the rules and regulat Division have been complied with and th is true and complete to the been of my kn	tions of the Oil Conservation		RVATION DIVISION N 21 1993				
Signature	stulf	By ORIGINAL SIGN	ED BY JERRY SEXTON				
Robert Marshall Printed Name	Vice-President	DISTRICT	ISUPERVISOR				
	Title 915/685-0113	Title					
INSTRUCTIONS: This form	Telephone No.	an a					

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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. 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.







## Job separation sheet

Submit 5 Copies				State of	New Mex	·					
Appropriate District Office DISTRICT 1		Energ	y, Miner	als and N	latural Res	ico Surces Departi	ment		Form C-104		
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II									Revised 1-1-89 See Instructions at Bottom of Page		
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	)	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088									
1000 Rio Brazos Rd., Aztec, NM 87	410 RE	QUEST				D AUTHOR					
I. Operator	·	TOT	RANSF	ORTO	NL AND N	AUTHOR	SAS				
SNYDER OIL CORPO	DRATION	L					We	II API No.			
777 MAIN STREET Reason(s) for Filing (Check proper bo	SUITE	2500	L	FORT	WORTH,	TEXAS 7	76102				
New Well		Change	e in Transp	oner of:		Ther (Please exp	lain)				
Change in Operator	Oil Casing	read Gas	L Dry G								
If change of operator give name and address of previous operator	MURPHY	OPER	ATING	CORP	ORATIO	N					
IL DESCRIPTION OF WEI Lesse Name Chaverou	L AND L	EASE					<u> </u>				
Jennifer CSA Uni	<u>t Sec.</u>	Well N 26 1		ame, Inclu avero(	ding Formatic O San J	a Andres	Kin Stat	d of Leave e, Federal or Fee	Lease No.		
Unit LetterK	. 10	80			0		· · · · · · · · · · · · · · · · · · ·		<u>NM-010899</u>		
Section 26 Town	uship 7S	<u></u>		om The _	έφ L	ine and2	30	Feet From The	منا		
				<u>33e</u>		NMPM, ROC	<u>) seve</u>	LT	County		
II. DESIGNATION OF TRANSPORT	MSPORT	OF OF OF O	OIL AN	D NATL	Address (G	ive address to	42-1				
Scurlock Permi	inghead Gas		or Day					d copy of this for			
Trident NGL _	me.	C.					tich approve	proved copy of this form is to be sent)			
ive location of tanks.	i	Unit Sec. Twp. Rge. Is gas actually connected? When ?						n ?			
this production is commingled with th V. COMPLETION DATA	at from any o	ther lease o	or pool, give	e comming	ling order nur	nber:	l				
Designate Type of Completio	n - (X)	Oil We	11 G	as Well	New Well	Workover	Deepen	Piug Back Sa	me Restly Dirth Duri		
Date Spudded		pl. Ready	10 Prod.		Total Depth	1		P.B.T.D.	me Res'v Diff Res'v		
levations (DF, RKB, RT, GR, etc.)	Name of 1	Toducing I	Formation		Top Oil Gas	Pay					
erforations								Tubing Depth			
			<u></u>					Depth Casing S	hoe		
HOLE SIZE	CA	SING & T	, CASIN UBING SI	<u>G AND</u> ZE	D CEMENTING RECORD			SACKS CEMENT			
	_										
TEST DATA AND REQUE	ST FOR A	LLOW	ABLE								
IL WELL (Test must be after ate First New Oil Run To Tank	recovery of ic Date of Te	tal volume	of load oil	and must i	be equal to or	exceed top allow	able for this	depth or be for fi	ull 24 hours 1		
agth of Test					Producing M	thod (Flow, pur	φ, gas lift, e	ic.)			
	Tubing Pre	Tubing Pressure				Casing Pressure			Choke Size		
ctual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
AS WELL											
tual Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate MMCF			nsale		
ting Method (pitot, back pr.)	Tubing Pres	Tubing Pressure (Shui-in)			Casing Pressure (Shut-in)			Choke Size			
OPERATOR CERTIFIC	ATEOE	COL	TTANC	 							
Division have been complied with and	ations of the (	Dil Consen		. <b>с</b>	C	IL CONS	SERVA		/ISION		
is the and complete to the best of my i	mowledge an	belief.			Date	Approved	(	)GT 0 1 i	991		
Signature	Ing_		·								
Betty Usry Prod. Reporting Supr					By						
	<u>317) 33</u>	8-404	Title 13		Title_			· .			
		Telep	hope No.	-							

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  3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
  d) Senamte Form C 104 must be filled out for changes of operator.