Submit 5 Cooles
Appropriate District Office
DISTRICT 1
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 at Bottom of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Britos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION I. TO TRANSPORT OIL AND NATURAL GAS Operator Permian Resources, Inc., d/b/a Permian Partners, Inc. WEIL API No. Address 30-041-10617 P. O. Box 590, Midland, TX 79702 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Oil Dry Cas Change in Operator Effective: 6-1-43 Caringhead Gas [Condensate If change of operator give name and address of previous operator IL DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Jennifer Chaveroo CSA UN SEC 30 Kind of Lesso Since) Federal or Fee Leise Na Chaveroo San Andres OG-4897 Locution 1981.5 Unit Letter _ Fed From The North West Line and Feet From The Section 30 Township 7S Ringe 34E , NMPM, <u>Roosevelt</u> County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) XX Scurlock/Permian Name of Authorized Transporter of Casinghead Gas Box 1183 Houston, TX 77251-1183 XXX or Dry Gas Address (Give address to which approved copy of this form is to be sent) Trident NCL Box 300 Tulsa, OK If well produces oil or liquids, give location of tanks. 74102 Unit Twp Rge. Is gas acqually connected? When ? If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Cas Well New Well Workover Designate Type of Completion - (X) Deepen Plug Back Same Res'v DIT Rety Date Spudded Date Compl. Ready to Prod. Total Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Periorations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE (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.))IL WELL Date First New Oil Run To Tank Date of Ten Producing Method (Flow, pump. gas lift, etc.) ength of Test Tubing Pressure Casing Pressure Choke Size Ictual Prod. During Test Oil - Bbls Water - Bbls Gu- MCF **GAS WELL** Vetual Prod Test - MCF/D Length of Test Bbls. Coodensue AINCF Gravity of Cooden tale esting Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size 71. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complied with and that the information given above JUN 21 1993 is true and complete to the best of my knowledge and belief. Date Approved ORIGINAL SIGNED BY JERRY SEXTON

CAND OF SHEEMER SERVICES OF THE INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

signabert Marshall

Printed Nama 10, 1993

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title_

DISTRICT I SUPERVISOR

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

Vice President

915/685-0113ide

- 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.

RECEIVED

JUN 1 4 1993 OCD HOBBS OFFICE