Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico rgy, Minerals and Natural Resources Description

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

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

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OIL CONSERVATION DIVISION

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

DISTRICT III 1000 Rio Brizos Rd., Aztec, NM 87410

REQUEST FOR ALLOWARI F AND ALITHORIZATION

l.		TOTRA	NSPORT (DIL AND N	ATURAL	TIZATIOI Gas	V			
TO TRANSPORT OIL AND NATURAL GAS							Vell API No.			
Breck Operating Corp.						3	30-00-00			
Address									· / (·_/	
Р. О. Вох 911	Breckenri	dge, TX	76424-0	0911						
Reason(s) for Filing Check proper	box)			0	ther (Please ex	plain)	·····			
New Well		Change in 7	masporter of:	_	,	•				
Recompletion	Oil	L 1	Dry Gas]						
Change in Operator	Casinghea	d Cas X	Condensate []						
If change of operator give name and address of previous operator							······································			
II. DESCRIPTION OF WE	T. A.NIIN E. E.					· · · · · · · · · · · · · · · · · · ·				
Lease Name	LL AND LEA				·····					
Bate "A"		Well Na. F	Pool Name, Inclu				Kind of Lease		Lease No.	
Location			Vada Pe	nn ·			State Federal or Fee		058677	
Unit Letter P		0								
Unit Letter P	:66	<u> </u>	eet From The _	South_ Li	ne and66	0.	Feet From The	East	Line	
Section 22 Tors	vnshin 89	.	265	,						
Section 22 Town Energy Operating IP ILE TEMPORY OPERATION OF TR Name of Authorized Transporter of C Enron Oil Trading &	03		ange 36F		impm, r	<u>loosevel</u>	t		County	
HE BEST CNATION OF TR	ANSPORTE	R OF OIL	AND NATI	IIDAI CAC						
Name of Authorized Transporter of C	XI (X)	or Condensa	le	Address (Gi	we address to a	which amount	 		·	
Enron Oil Trading &	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188 Houston, TX 77251-1188									
Name of Authorized Transporter of C	nsporter of Casinghest Free LV X -1-9 bry Gas					hist seems	de (di	/231-11	88	
Irident NGL, Inc.	L. Inc.				Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids,	Unit	Unit Sec. Twp. Re			P.O. Box 50250 Midlar ls gas actually connected? When			nd, TX 79710		
rive location of tanks.	G	22 j	80 360	1 17						
f this production is commingled with t	hat from any othe	r lease or poo	d, give commins	ling order numi	ber:	9.	-1-66			
V. COMPLETION DATA				, ,		~~~~~				
Designate Type of Completi	~ (V)	Oil Well	Gas Well	New Well	Workover	Deepen	Pine Reck	Same Res'v	Diff Res'v	
Date Spudded		l	<u></u>	Ì	i	i Diopea	l log back	loame Ker A	jair Kesv	
Sale Spooled	Date Compi.	Date Compl. Ready to Prod.		Total Depth	^ <u></u> -	<u> </u>	P.B.T.D.			
levations (DF, RKB, FT, GR, etc.)	- None of B				Top Oil/Gas Pay					
in the control of the	Name of Producing Formation				Top CivOas Pay			Tubing Depth		
erforations	<u> </u>									
							Depth Casing	3 Shoe		
	77	BING CA	SING AND	CEMENTIN	IC PECOP	<u> </u>	<u> </u>			
HOLE SIZE	CASI	TUBING, CASING AND CASING & TUBING SIZE			DEPTH SET	<u>D</u>				
					DET IN SET			SACKS CEMENT		
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. TEST DATA AND REQU	EST FOR AL	LOWABI	Æ		· · · · · · · · · · · · · · · · · · ·		<u> </u>			
IL WELL (Test must be afte	r recovery of local	volume of lo	ad oil and must	be equal to or e	exceed top allo	wable for this	depth or he fo	e full 24 hair	- a l	
rate First New Oil Run To Tank	Date of Test			Producing Met	thod (Flow, pu	τφ, gas lýt, ei	ic.)	THE ET HOW	3.)	
and A Tra							•			
ength of Test	Tubing Pressu	Tubing Pressure Oil - Bbls.			Casing Pressure Water - Bbla			Choke Size		
etual Band David and										
ctual Prod. During Tes:	Oil - Bbls.							Gas- MCF		
	L	·								
AS WELL										
ctual Prod. Test - MCF/D	Length of Tes	i ·····		Bbls. Condensa	MANUCE					
							Gravity of Co.	ndensate		
sting Method (pitot, back pr.)	Tubing Pressu	ubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
				-	, ,		CHOKE SILE			
I. OPERATOR CERTIFIC	CATE OF C	OMPLIA	NCE			<u>-</u>				
I hereby certify that the rules and regi	ulations of the Oil	Conservation		1 0	IL CON	SERVA	TION D	NISIO	N	
Division have been complied with and that the information given above						,,		111010	1.4	
is true and complete to the best of my knowledge and belief.				Date Approved						
	<u> </u>		ļ	Date /	-hhioned		VVI V	ा ।		
Della da X	whe	<u></u>		_		~.				
Signature Relinda Lawler Relinda Lawler				By Orig. Signed by						
Belinda Lawler Production Clerk				Paul Kautz Geologist						
9-27-91 (817)559-3355				Title						
Date	(01/)3	Telephone								
•				1						

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 most in multi-line and the complete such changes.