ſ	NO. OF COPIES RECEIVED		~								
	DISTRIBUTION SANTA FE		NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110							
	FILE		Effective 1-1-65								
	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS								
	TRANSPORTER OIL		24. 1.4 3	1 0 7 1968							
	GAS GAS										
1.	PRORATION OFFICE		ىلە ئىرىپە	DIST. 3							
	Bristol Resources Corporation										
	Address 3601 E. 51st, Suit	e B, Tulsa, OK 74135									
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)								
	New Well	Oll Dry Gas									
	Change in Ownership X	Casinghead Gas Condens									
	If change of ownership give name and address of previous ownerU	nion Pacific Resources C	ompany, 1000 Louisiana, S	uite 3000, Houston,TX							
	77002										
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Inc. saing For		Fee State NM 10130							
	State 32-7-33 Unit	15 Chaveroo (Sa	Andres) Sidle, Found of	3934 &							
		80 Feet From The <u>South</u> Line	and <u>660</u> Feet From The								
	Line of Section 32 Tow	nship 7-S Range 33	3-E , NMPM, Rooseve	t Cou.ity							
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S Aidress (Give address to which approved	copy of this form is to be sent)							
	Mobil Pipeline		Address (Give address to which approved	copy of this form is to be sent)							
	Name of Authorized Transporter of Cas Cities Service Company	Inghead Gas 🛒 or Dry Gas 🗍 - OXY NGL	Box 300, Tulsa, Oklahom								
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? When	11-28-76							
	give location of tanks.	B 32 7-S 33-E h that from any other lease or pool, f	Yes give commingling order number:	11-28=/0							
IV.	COMPLETION DATA	Oil Well Gas Well		Plug Back Same Resty, Diff. Resty,							
	Designate Type of Completio	n - (X)									
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.							
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth							
	Perforations		<u> </u>	Depth Casing Shce							
		·									
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT							
				t where the second ten allow							
V.	TEST DATA AND REQUEST FOUL WELL	OR ALLOWABLE (Test must be aj able for this de	fter recovery of total volume of load oil an pth or be for full 24 hours)								
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	, e;c.)							
	Length of Test 9	Tubing Pressure	Casing Pressure	Choke Size							
	Actual Prod. During Test	Oil-Bbls,	Water-Bbls.	Gas - MCF							
	Actual Prod. During Test										
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate							
		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size							
	Testing Method (pitot, back pr.)	I dbing Plessus (shut-tn)									
VI	. CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION								
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED FEB 10	<u>1988</u> , 19							
		with and that the information given a best of my knowledge and belief.	BYOrig	Signed by							
			TITLE	160108 me							
	1 0.0	N.	This form is to be filed in co	ompliance with RULE 1104.							
	Sur Diplu	(ature)	I watt the form must be accompan	ble for a newly drilled or deepens ied by a tabulation of the deviation ance with BULE 111.							
	Sue Dipley Adminis	trative Manager	All sections of this form must be filled out completely for allow able on new and recompleted wells.								
		itle) 100									
	9/30 (D	ate)	well name or number, or transporte	n or other such change of condition be filed for each pool in multipl							
			completed wells.	· ···· •							

well name or	name or number, or transporter, or other such change of condition									onurion
Separate	Forms	C-104	must	be	filed	for	each	pool	in	multipl
completed we	116.									

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