Submit 5 Copies
Appropriate District Office
DISTRICT! 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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

T	T	OTRA	NSP(ORT OIL	AND NA	TURAL GA	\S				
I. Operator		WCII A	API No.	سرا. ۔ ا	M /						
Operator Permian Resour	ces, In	c. , (d/b/a	Permi	an Parti	ners, Inc	· 30	-005	-1045		
Address P. O. Box 590	M	li dlano	i. Te	xas 79	702						
Reason(s) for Filing (Check proper box)					on	ner (Please expla	in)				
New Well	İ	Change in									
Recompletion Oil Dry Gas											
Change in Operator X Casinghead Gas Condensate											
If change of operator give name and address of previous operator Earl	R. Bru	no Con	ipany	. Р	<u>0. Box</u>	590	Midlau	nd, TX	79702		
II. DESCRIPTION OF WELL	AND LEA	SE					- 1			ease No.	
Lease Name State 6	Well No. Pool Name, including							of Lease Federal or Fe	Federal or Fee K-2779		
Location / / / /											
. Unit Letter : ? C rea rion inc											
Section 6 Township	, 85		Range	33	E , N	ІМРМ,	Cha	ves		County	
TI DESIGNATION OF TRAN	SPORTEI	R OF O	LAN	D NATU	RAL GAS						
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent)											
Scurlock/Permian Corp?						P. O. Box 4648 Houston, TX 77210					
Name of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent) 10200 Grogan Mills Rd., Woodlands, TX 77380						
Trident NGL, Inc.				Rge.	Is gas actually connected? When			7			
If well produces oil or liquids, give location of tanks.	F	Sec. [Twp. 8S	33E	Yes		i	02-0	08-0		
If this production is commingled with that f	rom any other	r lease or p	pool, giv	e commingly	ing order nun	nber:		<u> </u>			
IV. COMPLETION DATA		Oil Well		Gas Well	New Well		Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -	- (X)	i	_i_			<u> </u>	L	DDTD	J		
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 T			Tubing Dep	Tubing Depth		
Perforations						Depth Casing Shoe					
Petrorations											
TUBING, CASING AND					CEMENTING RECORD				SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEN	15141	
					<u> </u>			 			
THE TANK DECLIES	TEODA	TIOWA	RLE		<u></u>			_ 			
V. TEST DATA AND REQUES	I FOR A	al valume	of load	oil and must	be equal to o	r exceed top allo	owable for th	is depth or be	for full 24 ho	ws.)	
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be Date First New Oil Run To Tank Date of Test						dethod (Flow, pu	ımp, gas lifi,	eic.)			
Length of Test	Tubing Pressure				Casing Press	sure		Choke Size	Choke Size		
					Water - Bbls.			Gas- MCF	Gas- MCF		
Actual Prod. During Test	Oil - Bbls.							J			
GAS WELL					1811 2	ANICE		Gravity of G	Condensate		
Actual Prod. Test - MCF/D	F/D Length of Test					Bbls. Condensate/MMCF					
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pres	sure (Shut-in)		Choke Size	_		
TOD CERTIFIC	ATE OF	COME	TIAN	NCE		011 001	ICED\/	ATION	DIVISIO	⊃N!	
VI. 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 is true and complete to the best of my knowledge and belief.					Dat	e Approve	d	IIN 14	1993		
is true and complete to the best of the											
JULIAN JULIA					∥ Ву₋	By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR					
Signature Randy Bruno President Title					Title						
Printed Name May 17, 1993	<u></u>	15/68		<u>13</u>							
Date		Tele	i soond:	₩.	11			a state and a section	والمراجع والمراجع والمراجع والمراجع	and the bearing the	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

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