Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

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

Well API No.

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

erator Earl R. Bruno						i			
	nd Tex	- as 797	02		1.:-1				
P.O. Box 590 Midlar son(s) for Filing (Check proper box)					Other (Please explain)				
w Well		Change in		r of:					
completion	Oil		Dry Gas Condensa						
ange in Operator	Casinghead	I Gas	Condens	<u></u>					
hanne of poerator pive name									_
address of previous operator	AND LEA	ASE				Kind of	Lease	Lea	se No.
DESCRIPTION OF WELL	KIND BLI	Well No.	Pool Nan	ne, Including	Formation	State F	ederal or Fee	K-277	'9
sase Name State 6		7	Ch	<u>averoo</u>	(San Andres)			<u></u> 1.	
ocation		100		No	7th Line and 1980) Fee	t From The	<u>Fast</u>	Line
Unit Letter	_ :	180_	_ Feet From	m The					County
C manuality	lp 85		Range	33E	, NMPM, Chay	<u>es</u>			
					PAL GAS		4.11.6	is to be see	<u></u>
I. DESIGNATION OF TRAN	ISPORTE	or Conde	IL ANI	NATU	RAL GAS Address (Give address to which	approved	copy of this Joi	77 <i>2</i> 10	•,
ame of Authorized Transporter of Ott	XX	0, 00,,00			P.O. BOX 4648 H Address (Give address to which	1005 CON	copy of this for	rm is so be ser	u)
Scurlock/Permian Jame of Authorized Transporter of Casin	nghead Gas	X	or Dry (Gas 🗔	P.O. Box 300 Tu	ılsa. (K. 7410	2	
Trident NGL, Inc.	- W- ·		- ₁	1 8	ls gas actually connected?	When	2		
well produces oil or liquids,	Unit	Sec.	Twp.	1 33E	Yes	l	2-8-1	01	
ve location of tanks.	<u> F</u>	1 6	185	e comminel	ing order number:				
this amountion is commingled with that	i from any ot	her lease of	boor Riv	,		Desert	Plug Back	Same Res'v	Diff Res'v
V. COMPLETION DATA		Oil We		Jas Well	New Well Workover	Deepen	Ling treev		j
Designate Type of Completion	1 - (X)	i	1_		Total Depth		P.B.T.D.		
Designate 1/10 of 1	Date Con	npl. Ready	to Prod.		Total Dep.		<u></u>		
		·	Formation		Top Oil/Gas Pay		Tubing Dept	h	
Elevations (DF, RKB, RT, GR, etc.)	vations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Depth Casin	g Shoe	
erforations					GENERATING RECORD)	_!		
		TUBING	J, CASI	NG AND	CEMENTING RECORD DEPTH SET			SACKS CEM	ENT
HOLE SIZE	C	ASING &	TUBING	31ZE					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
							 		
V. TEST DATA AND REQUI	EST FOR	ALLOV	VABLE		the equal to or exceed top allow	vable for th	is depth or be	for full 24 hou	rs.)
OIL WELL (Test must be after		total volun	ne of load	oil and mus					
	r recovery of				Producing Method (Flow, pur	φ, gas lift,	etc.)		
Date First New Oil Run To Tank	Date of	Test			t be equal to or exceed top allow Producing Method (Flow, pur	φ, gas lift,			
Date First New Oil Run To Tank	Date of	168			Producing Method (Flow, pur Casing Pressure	φ, gas lift,	Choke Size		
Date First New Oil Run To Tank	Date of Tubing I	168			Casing Pressure	ιρ, gas lift,			
Date First New Oil Run To Tank Length of Test	Date of	Pressure				ıp, gas lift,	Choke Size		
Date First New Oil Run To Tank	Tubing I	Pressure			Casing Pressure	ιφ, gas lift,	Choke Size		
Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Tubing I	Pressure			Casing Pressure Water - Bbls.	rp, gas lift,	Choke Size		
Date First New Oil Run To Tank Length of Test Actual Prod. During Test CAS WELL	Tubing I	Pressure			Casing Pressure Water - Bbls. Bbls. Condensate/MMCP	np, gas lift,	Choke Size Gas- MCF	Condensate	
Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Tubing I Oil - Bb	Pressure			Casing Pressure Water - Bbls.	rp, gas lýt,	Choke Size	Condensate	
Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Festing Method (pitot, back pr.)	Tubing I Oil - Bb Length of	Pressure of Test Pressure (S	hut-in)		Casing Pressure Water - Bbls. Bbls. Condensate/MMCP Casing Pressure (Shut-in)		Gas- MCF Gravity of Choke Size	Condensate	
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- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
- 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.