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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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I	TI	OTRAN	ISPC	ORT OIL	AND NAT	URAL GA	S	<del></del>			
					_	Well API No.					
Permian Resources, Inc., d/b/a Permian Partners, Inc. 30-005-205/7										2//	
Address D. D. Doy 500	M	idland.	To	vac 70	702						
P. O. Box 590  Reason(s) for Filing (Check proper box)		<u>ru ranu</u>	15.	X05	Other	r (Please explai	in)				
New Well	(	Change in T									
Recompletion	Oil		ory Gas								
Change in Operator X	Casinghead		Condens			500	M: 13 a.e.	. TV .	79702		
If change of operator give name and address of previous operator Earl	R. Bru	no Comp	any.	Р.	O. Box	590	Midlar	Π, ΙΔ	<i>L91</i> .UZ		
II. DESCRIPTION OF WELL	AND LEA	SE				<del> </del>	Vind.	of Lease		ease No.	
Lease Name	ate !	Well No. I	$\circ$	ane, Includin	ng Formation	.and		Federal or Fee	$\mathcal{B}^{-}$	8638	
Location Unit Letter	19	<u>80</u> 1	Feet Fro	om Th Ne	uth Line	and 19	80_ Fe	et From The	<u>we</u>	Line	
Section Township	, 8s	<u> </u>	Range	32	E, NN	ирм,	ha	ues	) 	County	
III. DESIGNATION OF TRAN	SPORTER	OF OI	ANI	D NATU	RAL GAS	address to wh	ich andrawa	conv of this f	ormis 10 be se	ini)	
Name of Authorized Transporter of Oil		or Condens	ale		Address (Give	14648	No.	aton	0477	210-4670	
or Dry (i2s   Audices (Up) and all the first of the first										7738	
Name of Authorized Transporter of Authorized						10200 Logan Mil Kd. Woodlands, It					
If well produces oil or liquids,	well produces oil or liquids, Unit Sec. Twp. Rge.					Is gas actually connected? When?					
rive location of tanks.			<u>85</u>	132E	ing order numb	Z=					
If this production is commingled with that IV. COMPLETION DATA	from any oute	r lease of p	, g.·				,		la B	birt Parly	
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover 	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded Date Compl. Ready to Prod.					Total Depth			P.B.T.D.			
all speak					Top Oil/Gas Pay			Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.)	evations (DF, RKB, RT, GR, etc.)  Name of Producing Formation					Top Old Case 1 = 9			Depth Casing Shoe		
Perforations											
		IDING (	7 A S11	NG AND	CEMENTI	NG RECOR	D				
UOLE 8175	TUBING, CASING ANI HOLE SIZE CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT		
HOLE SIZE	HOLE SIZE										
V. TEST DATA AND REQUES	ST FOR A	LLOWA	BLE						for Gill 24 hou	ere )	
OIL WELL (Test must be after r	ecovery of lot	al volume o	f load	oil and musi	be equal to or	exceed top allo	owable for th	esc.)	JOF JUL 24 NO.	23.7	
Date First New Oil Run To Tank	TFOR ALLOWABLE ecovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)										
	Tubing Pressure				Casing Pressure			Choke Size			
Length of Test	Tuoing Pleasure							Gas- MCF	Gas- MCF		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.	Water - Bois.					
GAS WELL								Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			5.271, 5.			
	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
Testing Method (pitot, back pr.)											
VI OPERATOR CERTIFIC	ATE OF	COMP	LIA	NCE	$\parallel$		NSERV	ATION	DIVISIO	NC	
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation											
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved UN 1 6 1993						
18 time and complete to the state of the sta											
TANDUAT WWW						By ORIGINAL SIGNED BY IEPRY SEXTON					
Signature Randy Bruno President						\$ 1.5 1.5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Printed Name Title											
May 17, 1993		715/685 Tele	phone i	No.						Santa and section with the second	

- 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
- 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.