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	HO. OF COPIES RECEIVED	REQUEST FO	SERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	FILE U.S.G.S. LAND OFFICE		SPORT OIL AND NATURAL GAS		
	TRANSPORTER OIL GAS GAS OPERATOR PROBATION OFFICE				
5.	Operator				
	Bristol Resources Corporation Address 3601 E. 51st, Suite B, Tulsa, OK 74135				
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:	Other (Please explain)		
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condense			
	If change of ownership give name and address of previous ownerU	nion Pacific Resources Co	ompany, 1000 Louisiana, S	uite 3000, Houston,TX 77002	
11.	DESCRIPTION OF WELL AND L	Well No. Foct Name, Including For	mation Kind of Lease		
	Levick State "1"	2 Chaveroo (Sar	n Andres) State, Federal ci	F•• State NM B-8638	
	Location Unit Letter F 19	80 Feet From The North Line	and <u>1980</u> Feet From The	- West	
	Line of Section 1 Tow	nship 8-S Range	32-E , NMPM, Chave	County	
111.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approved	l copy of this form is to be sent)	
	Mobil Pipeline	inghead Gas Y or Dry Gas	Address (Give address to which approved	copy of this form is to be sent)	
	Gities Service Company	DXY NGL INC	Box 300, Tulsa, <u>Oklahor</u>		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. G 1 8-S 32-E	Ts gas actually connected? When Yes	1-31-76	
IV.	this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA				
	Designate Type of Completio				
	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	Tubing Depth Depth Casing Shoe	
	Perforations	Perforations			
		TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLE SIZE				
v	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be af	ter recovery of total volume of load oil a pth or be for full 24 houre)		
	OIL WELL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift.	, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gas • MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Teet	Bble. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
V	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION FEB 1 1 1989		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Orig. Signed by Paul Kautz		
			TITLE Geologist		
	Sue Dipley		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviatio tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow		
	Sue Dipley Administrative Manager				
		ule) 30/88	All sections of this form must be filed of the changes of owner able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiplic completed wells.		
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ОСТ 1 0 1988 ОСО НОВВЅ ОFFICE

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