Submit 5 Certies Appropriate District Office DISTRICT I F.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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

Signaffice And PRUNC Frinted 14 and 16 5 7 Date	915-68 Telep	Title 113	Tille	NG TY		E GARAGE & B.	a canada da canada que
VI. OPERATOR CERTIFICATION OF THE PROPERTY OF	ations of the Oil Conserve that the information gives	ation	OIL CON Date Approved By		ATION E		N
ting Method (pitet, back pr.) Tubing Pressure (Shut-in)		Caxing Pressure (Shut-in)		Choke Size			
CAS WELL Citial Prod. Test - MCF/D Length of Test		Dbla. Condensate/MMCF		Gravity of Condensate			
Actual Prod. During Test	Oil - Bbis.		Water - Bbls.		Cias- MCI ²		
Length of Test	Tubing Pressure		Casing Pressure		Choke Size		
V. TEST DATA AND REQUES OH, WELL — (Test must be after re Date First New Oil Ray To Tank	T FOR ALLOWA ecovery of total volume of Date of Test	BLE fload oil and must	be equal to or exceed top allo Producing blethod (Flow, pw	wable for this mp, gas lift, e	depth or be fo	r full 24 hour	s.)
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
	TUBING,	CASING AND	CEMENTING RECOR	D .			
Elecations (DF, RKB, RT, GR, etc.) Name of Producing Formation Perforations		Tubing Depth Depth Casing Shoe					
Date Spudded	Date Compl. Ready to						
IV. COMPLETION DATA Designate Type of Completion	Oil Well	Gas Well	New Well Workover	Decpau	Plug Back	iame Res'v	v'aos nici
If well produces oil or liquids, give location of tanks. If this production is commingled with that i	G 5	8S 33E	Yes		25 - 76		
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Trident NGL, Inc.			Address (Give address to who P. O. Box 300 Is gas actually connected?		OK 74		
Mobil Pipeline	Name of Authorized Transporter of Oil X or Condensate Mobil Pipeline			Dalla:	s, TX 7.	5221-208	30
HI. DESIGNATION OF TRAN			RAL GAS Address (Give address to wh	 ,	705-6		
Section 5 Township		Range 33-F	•	naves			County
Lication Unit 1 etter				980 Fo	et From The	ast	Line
DESCRIPTION OF WELL AND LEASE Lease Plante State 5-8-33 Well No. Fool Name, Including Chaveroo				f Lease Federal or Fee			
Michanica Classification give name and all last of previous operator Bris		Corp. 66	55 S. Lewis, Ste	. 200	fulsa, O	K 7413	6
Recomplistion L. Change in Creation X	Casinghead Cas	Dry Gas Condensate					
Reason(s) for Filing (Check proper box)	Change in	Transporter of:	Other (Please expla	in)			
Address P. G. Braver 590 Mi	dland, TX 79	702	,				,
Carator Earl R. Bruno				Well A	.PI No. 		
I,	REQUEST FO TO TRAI	NSPORT OIL	ILE AND AUTHORIZ AND NATURAL GA	S			

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

market one a market market at the market at the contract of th

- 1) Request for allowable for newly deflied or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

 3) Fill as a only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

 (5) Sections C-104 must be filled for each pool in multiply completed wells.







Job separation sheet

NO. OF COPIES RECEIVED		
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMIS	SSION FOR FORM C-104.
SANTA FE	REQUEST FOR ALLOWABLE	Supersides Old C-104 and C-110 Effective 1-1-65
FILE	AND	101 P 6 . Fliective 1-1-92
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND N	ATURAL GAS
LAND OFFICE		(n (n − 1)
I RANSPORTER OIL		and the second of the second o
GAS		
OPERATOR		
PRORATION OFFICE		
Operator		
Bristol Resource	es Corporation	
	uite B, Tulsa, OK 74135	
	Other (Please	a-nlain)
Person(s) for filing (Check proper b	box)	explain
Reason(s) for filing (Check proper b	Change in Transporter of:	·
New Welt	JUX /	
New Well Recompletion Change in Ownership X If change of ownership give name	Change in Transporter of: Oil Dry Gas Casinghead Gas Condensate	
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner	Change in Transporter of: OII Dry Gas Casinghead Gas Candensate Union Pacific Resources Company, 1000 Lo	ouisiana, Suite 3000, Houston,TX 77002
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo ID LEASE Well No.; Pool Name, Including Formation	nuisiana, Suite 3000, Houston,TX 77002 Kind of Lease No.
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Legse Name	Change in Transporter of: OII Dry Gas Casinghead Gas Candensate Union Pacific Resources Company, 1000 Lo DLEASE Well No. Pool Name, Including Formation	ouisiana, Suite 3000, Houston,TX 77002
New We!! Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo ID LEASE Well No.; Pool Name, Including Formation	nuisiana, Suite 3000, Houston,TX 77002 Kind of Lease No.
New We!! Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location	Change in Transporter of: OII Dry Gas Castinghead Gas Condensate Union Pacific Resources Company, 1000 Lo D LEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres)	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease Lease No. State, Federal or Fee State NM 5144
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33	Change in Transporter of: OII Dry Gas Castinghead Gas Condensate Union Pacific Resources Company, 1000 Lo ID LEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres)	nuisiana, Suite 3000, Houston,TX 77002 Kind of Lease No.
New We!! Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter	Change in Transporter of: OII Dry Gas Castinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East
New We!! Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East
New We!! Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter	Change in Transporter of: OII Dry Gas Castinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DLEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980 Township 8-S Range 33-E , NMFM,	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East Chaves County
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter Line of Section 5 DESIGNATION OF TRANSPO	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo Union Pacific Resources Company, 1000 Lo DEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980 Township 8-S Range 33-E , NMFM, ORTER OF OIL AND NATURAL GAS	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DLEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980 Township 8-S Range 33-E , NMPM, ORTER OF OIL AND NATURAL GAS OIL S or Condensate Address (Give address to	Kind of Lease State, Federal or Fee State NM 5144 Feet From The East Chaves County
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter Line of Section 5 DESIGNATION OF TRANSPO Name of Authorized Transporter of Mobil Pipeline	Change in Transporter of: OII Dry Gas Castinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DLEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980 Township 8-S Range 33-E, NMFM, ORTER OF OIL AND NATURAL GAS OIL S or Condensate Address (Give address to	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East Chaves County
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980 Township 8-S Range 33-E , NMFM, ORTER OF OIL AND NATURAL GAS OIL S or Condensate Address (Give address to Casinghead Gas XI or Dry Gas Address (Give	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East Chaves County To which approved copy of this form is to be sent)
New Well Recompletion Change in Ownership X If change of ownership give name and address of previous owner DESCRIPTION OF WELL AN Lease Name State 5-8-33 Location Unit Letter Line of Section 5 DESIGNATION OF TRANSPO Name of Authorized Transporter of Mobil Pipeline	Change in Transporter of: OII Dry Gas Casinghead Gas Condensate Union Pacific Resources Company, 1000 Lo DLEASE Well No. Pool Name, Including Formation 9 Chaveroo (San Andres) 1980 Feet From The South Line and 1980 Township 8-S Range 33-E , NMFM, ORTER OF OIL AND NATURAL GAS OIL Casinghead Gas or Dry Gas Address (Give address to Address (Give address (Give address to Address (Give address (Give address (Give address (Give address (Give ad	Nuisiana, Suite 3000, Houston, TX 77002 Kind of Lease State, Federal or Fee State NM 5144 Feet From The East Chaves County To which approved copy of this form is to be sent)

ame Resty, Diff. Resty. Gas Well Designate Type of Completion -(X)P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc., Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
Date First New Oil Run To Tanks Producing Method (Flow, pump, gas lift, etc.) Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test

GAS WELL Gravity of Condensate Bbis. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.)

Water - Bble.

VI. CERTIFICATE OF COMPLIANCE

Actual Prod. During Test

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.

Oil - Bbls.

Suc	Dipley	Y
Sue Dipley	(Signature)	
	<u>Administrative</u>	Manager
	(Title)	
	9/30/88	

(Date)

OIL CONSERVATION COMMISSION

Ggs - MCF

•	
APPROVED	FEB 1 1989
BY	Orig. Signed by
	Paul Kautz Geologist
TITLE	

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepenswell, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow able on new and recompleted weils.

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 multiple completed wells.