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Appropriate District Office
DISTRICT I 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

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	DEOL	CCT EOE	5 A I I	OWAR	LE AND AUT	HORIZA	ATION			
	HEQU	EST FOR			AND NATUE	RAL GAS	3			
I								Pl No.		
Operator Permian Resour	ces, In	, d <u>ic. —</u>	/b/a	Permi	an Partner		30	-005	- 1405	62
Address P. O. Box 590		lidland,	Tex	as 79	702					
Reason(s) for Filing (Check proper box)					Other (Pla	ease explain	)			
New Well	,	Change in Tr	ransport	er of:						
Recompletion	Oil	□ D	ry Gas							
Change in Operator	Casinghead	Gas 🔲 C	ondens	ite _				<del></del>		
	R. Bru	no Comp	any	Р.	0. Box 59	0	Midlan	d, TX 7	9702	
II. DESCRIPTION OF WELL	AND LEA	SE					1.55			ease No.
Lease Name Well No. Pool Name, Includi				ig tournation			ind of Lease Lease NM-514			
State 5-8-33		14	Chave	<u>eroo S</u>	an Andres			,		
Location  Unit Letter   : 660 Feet From The South Line and 660 Feet From The Line										
Section 5 Township	, 8S	R	ange	33E	, NMPM	1		Chave	s	County
III. DESIGNATION OF TRAN	<u>SPORTEI</u>	R OF OIL	AND	NATU	Address (Give add	tress to which	happroved	copy of this fo	rm is to be se	ini)
Name of Authorized Transporter of Oil		or Condensal	<sup>12</sup>	$\supset$	P. 0. Box	4648 H	ouston	, TX 77	210	
Scurlock/Permian Corp	<u> </u>	<del>\</del>	r Dry G	34	Address (Give ada	tress to which	h approved	copy of this fo	rm is to be se	ent)
Name of Authorized Transporter of Casing	yhead Gas	<b>☆</b> •	ט עום זי	••	10200 Gro	dan Mil	ls Rd.	, Woodla	nds, TX	74102
Trident NGL. Inc.	1 11-2	Sec IT	wp.	Rge.		nected?	When	7,000	1 ~1/	
If well produces oil or liquids, give location of tanks.	i G i	5	8S	33E	Yes		Ĺ	12-04	1-11	2
If this production is commingled with that i	from any other	er lease or po	ol, give	commingl	ing order number:					
IV. COMPLETION DATA							D	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion	- (X)	Oil Well	Ga	s Well	New Well   Wo	orkover	Deepen		Jame Ros	<u></u>
Date Spudded	Date Comp	I. Ready to P	rod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	oducing Form	nation		Top Oil/Gas Pay			Tubing Depth		
•								Depth Casing Shoe		
Perforations										
	<del></del> т	TIRING, C	ASIN	G AND	CEMENTING	RECORD	)			
11017 0175	CAS	SING & TUB	ING SI	ZE	DEF	TH SET		s	ACKS CEM	ENT
HOLE SIZE		31110 0 1 1 0								
								<del> </del>		
		* * A *** * *	0 Y 72		L			J		
V. TEST DATA AND REQUES OIL WELL (Test must be after r.	T FOR A	LLOWAL	ULE.		he equal to or exce	ed top allow	able for this	depih or be f	or full 24 hou	vs.)
OIL WELL (Test must be after re	ecovery of lot	tal volume of	load oi	i ana musi	Producing Method	(Flow. pum	p, gas lift, e	ıc.)		
Date First New Oil Run To Tank	Date of Test			Producing Meniod (1 10 W. p. 2. 41 8 - 47 1 W. p. 2. 41 8						
Length of Test	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF		:

Length of feat	1.001118		Gas- MCF	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Ga- Wei	
GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.)	Length of Test Tubing Pressure (Shut-in)	Bbls. Condensate/MMCF  Casing Pressure (Shut-in)	Gravity of Condensate  Choke Size	

	TO SEE TANKER
CEDITIE!	INTE OF COMPLIANCE
VI. OPERATOR CERTIFIC	AID OF COME PRIMICE
VI. OI LIGHT OFF G	Ot G
I hereby certify that the rules and regul	ations of the Oil Conservation
I heleby certify miss and reserved and	a control of the shore
Division have been complied with and	that the information fiven spoke

is true and complete to the best of my knowledge and belief.

Signature Randy Bruno President

Printed Name May 17, 1993

Date

Title 915/685-0113 Telephone No. OIL CONSERVATION DIVISION JUN 1 4 1993

Date Approved \_

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

Title\_

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.