Submit 5 Certies 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

DISTRICT II P.O. Drawer DD, Artesia, PM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088								
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST FO	OR ALLOWAF	UA G'4A BJE	THORIZ					
I. Operator	TO TRANSPORT OIL AND NATURAL GA				S Weil API No.				
Earl R. Bruno						·			
	dland, TX 79	9702		lease explai					
Reason(s) for Filing (Check proper box) New Well	Change in	Transporter of:	· · ·	isms symm	n)				
Recompletion X	Oil Casinghead Gas [Dry Gas	••						
If change of operator give name and address of previous operator Bris			55 S. Lewi	s, Ste.	200	Tulsa, O	7413	6	
II. DESCRIPTION OF WELL	AND LEASE		,		:				
Lease Name State "6"	Well No. Pool Name, Inch 14 Chaveroo		ling Formation (San Andres)		Kind of Lease State, Federal or Fee		Lease No. K-2779		
Location		:			,		Foct		
Unit LetterO	: 660	Feet From The	/			et From The	Last	Line	
Section 6 Townshi	p 8-S	Range 33-I	NMPI	<u>4,</u>	<u> </u>	aves		County	
HI. DESIGNATION OF TRAN	SPORTER OF Conden		RAL GAS Address (Give aa P. O. Bo						
Mobil Pipeline Name of Authorized Transporter of Casing	Address (Give ad	copy of this for	m is to be se						
Trident NGL, Inc. well produces oil or liquids, Unit Sec. Twp. Rge.			P. O. Box 300 Tulsa. Is gas actually connected? When			OK 74102			
give location of tanks.	F 6	8s 33E	Yes			17-77			
If this production is commingled with that IV. COMPLETION DATA	Irom any other lease or	pool, give comming							
Designate Type of Completion	- (X) Oil Well	Gas Well	New Well W	orkover	Deepen	Plug Back S	aine Res'v	Diff Res'v	
Date Syndded	Date Compt. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (OF, RKB, RT, GR, etc.)	ntions (CF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations		· · · · · · · · · · · · · · · · · · ·	1			Depth Cusing	Shoe		
<u>'</u>	TUBING,	CASING AND	CEMENTING	RECORL)				
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUES OH, WELL Gest must be ofter to	FOR ALLOW!	ABLE of load oil and must	he eastal to or exc	eed top allov	vable for this	depth or be for	full 24 how	rs.)	
Date First New Oil Run To Tank	Date of Test	,	Producing Metion	d (Flaw, pw	φ, gas lýt, e	tc.)			
Length of Test	Tubing Pressure	Curing Pressure			Choke Size				
Actual Prod. During Test	Oil - Bbls.	Water - Bbis.			Gos- MCF				
GAS WELL						10			
Actual Prod. Test - MC17D	Length of Test	Bbls. Condensate/lvll/ICF			Gravity of Condensate				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-In)			Choke Size	,		
VI. OPERATOR CERTIFIC			Oll	CON	SERV	ATION D	IVISIC	N	
I hereby certify that the rules and regula Division have been complied with and	that the information give	vation en above			n:	32419	91	7. •	
is true and complete to the best of my	nowledge and belief.		Dale A	pproved		JWT N			
Handyks	By								
Signature ANDY BRUN									
Printed Name	015/0	Title 112	Tille						

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

Date

1) Request for allowable for newly drilled 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.

Telephone No.

- 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.