Submit 5 Cookes
Appropriate Distinct Office
P. ST. 1760, Hobbs, NM 38240

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-19 See Instructions at duttom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

1000 Rio prazos Rd., Artec, NM 87410

DISTRICT T P.O. Drawer DD, Anesia, NM 38210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TO TRA	NSPORT OIL	AND NAT	JRAL GAS	S				
Earl R. Bruno		Well Ai		5-7c	697				
P.O. Box 590 Midl	land, Texas	79702							
eason(s) for Filing (Cheix proper box)			Other	(Please explan	A)				
lew Well	•	Transporter of:							
.▼		Dry Cas 📙							
	Casinghead Gas								
change of operator give name E1 Ri	an, Inc., P.	.O. Box 911,	Lubbock	, Texas	79408				
I. DESCRIPTION OF WELL A	ND LEASE	Chaverro							
ease Name Well No. Pool Name, Including									
Chaveroo San Andres Un	nit 1	San Andres			State, F	ederal or For	Fee	<u> </u>	
Unit Letter	. 2200	/ _ Feet From TheS	L Line	and 2200	F∞	t From The _	EL	Lice	
Section 3 Township	8 South	Range 32 Eas	st <u>NM</u>	PM. Chave	es			County	
T DESCRIPTION OF TRANS	CROPTER OF C	ATT AND NATED	DAT CAS	Ins	ection	. 4.	eil		
TI. DESIGNATION OF TRANS Name of Authorized Transporter of Oil	C			OGGTELS IO WA				nt)	
Phillips 66 Company	or Codos	. 1 1	9Cl Adam					74004	
Name of Authorized Transporter of Casing	nead Gas X	or Dry Gas	Attn: Pl	ant Acco	ounting,	RM 456	<b>.</b>		
Trident NGL, Inc.  If well produces oil or liquids,	T Week   Sec.	Two Rge	10200 Gx	consecred?	Hill Rot		-Woodlan	<del>ds, TX</del> 77380	
give location of tanks.						<u> </u>			
If this production is communicied with that f	rom any other lease of	Pool, give commingi	ing order numb	er. /					
Designate Type of Completion	- (X) Oil We	II Gas Well	New Well	Workover	Deepea	Plug Back	Same Res v	Diff Resv	
Date Spudded	Date Compt. Ready	to Prod.	Total Depth	-		P.B.T D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depub			
Perforations						Depth Casing Shoe			
	TUBING	, CASING AND	CEMENTI	NG RECOR	.D	<u>!</u>			
HOLE SIZE	<del></del>	TUBING SIZE	1	DEPTH SET			SACKS CEMENT		
			<u> </u>			<del> </del>			
	<u> </u>		1			<del> </del>		<del></del>	
V. TEST DATA AND REQUES	T FOR ALLOY	VABLE	<u>.i </u>			<u> </u>			
	recovery of total volum						for full 24 hou	ws )	
Date First New Oil Run To Tank	Date of Test		Producing M	eunod (Flow, pa	ump, gas 191, i	uc.)			
Length of Test	Tubing Pressure	Casing Pressure			Chore Size				
Activa Prod. During Test	Oil - Bbla	Water - Bola	Water - Bbia.			Gas- MCF			
GAS WELL	1		1,	<del></del>		<u>!</u>			
Actual Prod. Test - MCF/D	Length of Test	Bbis. Coades	Bbis. Condensate MMCF			Gravity of Condensus			
Tesung Method (puot, back pr.)	Tubing Pressure (Shul-in)		Caung Pressure (Shuk-ia)			Choke Size			
VI. OPERATOR CERTIFIC				OIL COI	NSERV	ATION	DIVISIO	 ON	
I hereby cerufy that the rules and regulations of the Oil Conservation Division have been computed with and that the information given above is true and completely to the best of my information and belief.							SEP 0 8 '92		
	Dilli		Date	a Approve	₽ <b>0</b>				
y: Juan	1 min	N	Bv	ORIGINA	L SIGNED	BY JERRY	SEXTON		
Randy Bruno	Pre	sident		Đi	STRICTIS	UPERVISO	OR .		
Phased Name August 31, 1992	915/	685-0113	Title						
<b>D</b>	r	Telephone Nus	11						

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 with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted weils.
- 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.