Submit 5 Copies
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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.					ABLE P									
Operator		10 1H	ANS	PORT	OIL AND) NA	TURAL	GΑ		API No.	···			
Earl R. Brund							30-005-20766							
Address				 ·						<u> </u>	U	- 🛪	2110V	2
P.O. Box 590	Midland	, Texa	s 7	9702										
Reason(s) for Filing (Check proper box)				-		Oth	er (Please e	expla	in)					
New Well		Change in	1	sporter of:	_									
Recompletion	Oil		` `	Gas L	_									
Change in Operator X	Casinghea	d Gas _	Con	densate										
and address of previous operator Ea	<u>irl R. Bi</u>	runo	P.0). Box	590 Mi	dlar	id, Tex	(as	79702					
II. DESCRIPTION OF WELL	AND LEA	\SE												
Lease Name		luding Form	ding Formation Kind							case No.				
Chaveroo San Andres	; Unit	San A	San Andres Sum				Federal or Fee NM 13999				1			
Location (Tract (A)	001	_			511		i	$\bigcirc \bigcirc$	^		1			
Unit LetterM	_ :990)	Feet	From The	South	Line	and	<u> 99</u>	<u>() </u>	ect From The	e <u>W</u>	257		Line
Section 3 Townsh	ip 83	S	Rang	70	32 E	N/A	ирм, і	ch	aves				-	
·	<u>, , , , , , , , , , , , , , , , , , , </u>		10011	30	<i>201</i> C	7 1 14	arivi,		MVCS				Coun	<u>y</u>
III. DESIGNATION OF TRAI				ND NAT										
Name of Authorized Transporter of Oil	11/1-	or Conder						which		copy of this				
Name of Authorized Transporter of Casinghead Gas Y or Dry Gas						1440 PGZa ottice K Address (Give address to which approved					<u> artl</u>	<u>PSVI)</u>	le N	<u> 14</u>
Trident NGL. Tr	great Cas	ΙΧ̈́	וע וט	Iy 025	1020		staaress 10		II S R		dar	4 .	nu) TV -7	ニフスク
If well produces oil or liquids,	Unit	Sec.	Twp.	R			connected		When		11011	1013	14.7	128
give location of tanks.	11		L						i					
If this production is commingled with that IV. COMPLETION DATA	from any othe	r lease or	pool, g	give commi	ngling order	numb	er:							
TV. COMPLETION DATA		Oil Well		Gas Well	New '	W-11	Workover		Descrip	l Rus P			- <u>G</u>	
Designate Type of Completion	- (X)	1	i	OZS WEII	1 New	1	MOLYOVEL	1	Deepen	Plug Back	: Same	Kcs'v	Diff Re	ž. V
Date Spudded Date Compil. Ready to Pr					Total D	Total Depth				P.B.T.D.	ــــــــــــــــــــــــــــــــــــــ		1	
Elevations (DF, RKB, RT, GR, etc.)	ducing Fo	rmatio	ы	Top Oil	Top Oil/Gas Pay				Tubing Depth					
Perforations					Ш	<u> </u>					Depth Casing Shoe			
										Depui Casi	ng Snoe	;		İ
	π	IBING.	CAS	ING AN	D CEME	NTIN	G RECO	RD		1				
HOLE SIZE	CASI	<u> </u>	DEPTH SET					SACKS	CEME	NT				
TECT DATA AND DECLISE	TEODAL	LOW	DV T	•]
IL WELL (Test must be after re					et ha aqual		read ion a	llavo	bla for this	danek an ka	fam 6.11	24		
Date First New Oil Run To Tank		t be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)												
	Date of Test					_	,	•						
ength of Test	Tubing Pressure						;			Choke Size				
		<u> </u>												
Actual Prod. During Test	Oil - Bbls.	Water - I	Water - Bbis.					Cas- MCF						
GAS WELL Actual Prod. Test - MCF/D	11	 .			150-0									
COULD PTOOL 1 SER - MCP/D	Length of Tes	Bols. Co	Bbls. Condensate/MMCF					Cravity of Condensate						
esting Method (pitot, back pr.)	Method (pilot, back pr.) Tubing Pressure (Shut-in)						Casing Pressure (Shut-in)				Choke Size			
I. OPERATOR CERTIFICA	ATE OF C	OMPI	IAN	VCE										
I hereby certify that the rules and regula	tions of the Oil	l Conserva	tion			O	IL CO	NS	ERVA	NOIT	DIVI	SIOI	V	
Division have been complied with and this true and complete to the best of my kn														
and the confidence to the ocal of the to	rowienke and (·····			Da	ate A	Approve	ed						
Kandy / DRun O						Orig. Signad L.								
Signature						By Paul Kaut								
Randy Bruno Prod. Mgr.						By Paul Kauts Geologist,								
Printed Name 11/4/92	91	l5/685		13	Tit	le_				···.				
Date		Telepi	A spor	io.										

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 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.