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 I-I-89 See Instructions at Bottom of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REQU	EST FO	OR AL	LOWA	BLE AND A	AUTHORIZ	ATION				
I.	TO TRANSPORT OIL A						S Well A	PI No.			
Omra	PERMIAN RESOURCES INC., DBA Permian Part						30-025-28/21-00				
Address P. O. Box 590	1	Midland	i, Ie	xas 7	9702	er (Please explai					
Reason(s) for Filing (Check proper box)		~ .	т			er li isms exhini	,,,				
New Well		Change in									
Recompletion	Oil	:	Dry Ga								
Change in Operator X	Casinghea	d Gas	Conden	Eate							
If change of operator give name and address of previous operator Earl	R. Bri			P	. 0. Box	_590	<u>Midlar</u>	id, IX 7	9702		
II. DESCRIPTION OF WELL AND LEASE Lease Name Seven Rivers Queen Unit Well No. Pool Name, Including Formation Eunice Seven Rivers Queen South Kind of Lease Lease Lease									ease No.		
Location Unit Letter	. 25	575		- \	arthum		ПЕ	et From The	Eas	tline	
Section Township 22S Range 3						мрм,	Lea	County			
	anone	ים מים	rr a NJ	n NATI	IRAT. GAS						
MI. DESIGNATION OF TRAN		or Conden	ELL AIN	DIATE	Address (Giv	e address to wh	ich approved	copy of this fo	rm is to be s	ens)	
INTINE OF Audionizes Financial of the						P 0 Box 2528 Hobbs, NM 88240					
Texas New Mexico Pipe	ine co		or Dry	Gas 🗀	Address (Giv	e address to wh	ich approved	copy of this fo	rm is to be s	ens)	
Name of Authorized Transporter of Casing Warren Petroleum & GP!	ynead Gas VIR Tox	aco F&	P Inc	C.	,				5/1/8		
	Unit	S∞.	Twp.	Rge	Is gas actuall	y connected?	When	. 7	3/16/		
If well produces oil or liquids, give location of tanks.	; T	3/1	1225	1 36F	Yes		l	GPM	3/10/. 1 3/25/1		
If this production is commingled with that i	mm any oth	er lease or	pool, giv	ve comming	ling order num	ber: R- <u>663</u> /	<u> (R-4671</u>	warrer	1 3/23/1		
IV. COMPLETION DATA	itom any on		, , .	•							
IV. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	1	i		Ì						
Date Spudded	Date Compl. Ready to Prod.				Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations					<u>.l</u>	Depth Casing Shoe					
		CIDDIC	CAST	NG AND	CEMENTI	NG RECOR	D				
	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			S	SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE										
	 										
	ļ										
	ļ <u>. </u>										
	m FOR	VI OW	ADIE								
V. TEST DATA AND REQUES OIL WELL (Test must be after r.	T FOR A	ALLOW!	ADLIL.	all and mus	the equal to or	exceed top allo	wable for the	is depth or be fo	or full 24 hou	urs.)	
	Date of Te	olal volume	oj toda	OR OTHER PROPERTY.	Producing M	ethod (Flow, pu	mp, gas lýt, .	elc.)	_		
Date First New Oil Run To Tank											
	ļ				Casing Press	ure		Choke Size			
Length of Test	Tubing Pro	आख			022.2						
					Water - Bbls.			Gas- MCF			
Actual Prod. During Test	Oil - Bbls.										
GAS WELL								Gravity of C	ondensale		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Coadensate/MMCF			Gravity or C	Gravity or conservation		
Azimi Flore Test - Merro					Casing Pressure (Shul-in)			Choke Size	Choke Size		
l'esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Press						
VI. OPERATOR CERTIFIC	ATE OF	COM	LIA	NCE		OIL CON	ICED\/	ΔΤΙΟΝΙ Ι	אואוכו	NC	
VI. OPERATOR CERTIFIC	ntions of the	Oil Conse	vation		- '	OIL CON	ISLITY	AHON	J1 V 10 IV	J. •	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					-	JUN 1 1 1993					
Division have been complete with and that the maximum and belief.					Date Approved JUN 11 1993						
					a second but						
- CULLY TELLOWING					ll pu	Orig. Signed by By ——————————————————————————————————					
Signature Pandy Rruno President					By -		- Paul - Ge olo	gist			
Title)	-	-			
Printed Name May 17 1993		915/68		13	Ime	·					
May 17, 1993		713/00 Tel	ephone l	No.							
Date								a aliety var a light ste	The state of the s	Designation and a constant	

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.
- 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.