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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, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

<b>Y</b>	nego: T	OTRAN	SPC	ORT OIL	AND NA	TURAL GA	\S				
I. Oper permian resour							1 11/611 /	PINO. 1025-	28/2	2-00	
Address D. O. Boy E00		idland,	То	vac 70	0702						
P. O. BOX 590  Reason(s) for Filing (Check proper box)		ru i anu,		XdS/.	Oth	er (Please expla	in)				
		Change in Ti	адеро	nter of:	_						
New Well	Oil		ry Gai	1 1							
Recompletion X	Casinghead		onden	_							
Cabana of openior give name					O Pau	590	Midlar	d TY .	79702		
and address of previous operator Earl	R. Bru	<u>no</u>		P_	O. Box	590	nulliar	<u> </u>	(11.112		
II. DESCRIPTION OF WELL	AND LEA	SE									
Lease Name Well No.   Pool Name, Include						ng i omianou			( Lease No. Fee Lease No.		
Seven Rivers Queen Un	<u>it</u>	$\varphi()$	<u>un i</u>	<u>ce Seve</u>	<u>en River</u>	s Queen S	outh		- 1		
Location Unit Letter		05 F	eel Fro	om The S	nthu	e and 12	<u>80                                    </u>	et From The	Wes	t_Line	
Section 34 Township	228		ange		36E , N	мрм,	Lea	<u> </u>		County	
	~~ ~ ~ ~ ~ ~ ~ ~ ~	OF OU	4 % 71	n Niatii	DAT GAS						
III. DESIGNATION OF TRAN	SPORTE	or Condensa	AIN	- NATO	Address (Giv	e address to wh	ich approved	copy of this fo	orm is to be se	:n1)	
Name of Authorized Transporter of On						P 0 Box 2528 Hobbs, NM 88240					
lexas new mexico riperine company						Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casing											
Warren Petroleum & GPM & Texaco E&P Inc.  If well produces oil or liquids,   Unit   Sec.   Twp.   Rge					Is gas actually connected? When			7 Texaco 5/1/84 GPM 3/16/74			
hive location of tanks	7	34 12	225	36E	Yes			Warre			
If this production is commingled with that i	from any other	r lease or po	ol, giv	e comming	ling order num	ber: R- <u>663</u>	<u>/R-4671</u>	nai i e	3/23/0	-	
IV. COMPLETION DATA	•						, <del></del>	l pu poste	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	(	ias Well	New Well	Workover	Deepen	Plug Back	Same Kes v	J	
Date Spudded Date Compl. Ready to Prod.					Total Depth		- <del></del>	P.B.T.D.			
Date Spender	•										
evations (DF, RKB, RT, GR, etc.)  Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations	<u> </u>							Depth Casin	g Shoe		
								<u> </u>			
TUBING, CASING AND					CEMENTI	NG RECOR	D	THE OFFICE OF LIGHT			
HOLE SIZE						DEPTH SET		SACKS CEMENT			
11022 0.20								ļ			
								<del> </del>			
					<u> </u>						
V. TEST DATA AND REQUES	T FOR A	LLOWAI	3LE			aread top all	umble for thi	denih or be i	for full 24 hou	rs.)	
V. TEST DATA AND REQUES OIL WELL  (Test must be after re	ecovery of tol	al volume of	load o	il and must	be equal to of	ethod (Flow, pu	ma eas lift.	(c.)	<u></u>		
Date First New Oil Run To Tank	Date of Tes				Producing M	eurou (1·10w, pa	<i>,</i> , γω . , , , .	,			
					Casing Press	ine		Choke Size			
Length of Test Tubing Pressure					Casing 1 tos						
Asian Prod During Test Oil - Bbls.				Water - Bbls.			Gas- MCF				
Actual Prod. During Test											
	<u></u>										
GAS WELL					Bbls. Condes	ENE/MMCF		Gravity of C	ondensate		
Actual Prod. Test - MCF/D Length of Test					Bois. College						
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size	Choke Size		
	· EE OE	COMPI	TAN	CE	1				- n // O / C	> N 1	
VI. OPERATOR CERTIFIC	AILOF	COMPL	iion MANIN	ICL	(	OIL CON	ISERV	AHONI	DIAI2IC	NΛ	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					III 1 1 1993						
Division have been complied with and that the internation gives is true and complete to the best of my knowledge and belief.					Date Approved JUN 11 1993						
						Orig. Signed by					
ALL Flubrus Comment					Di/	Pa	ul Kautz	•			
Signature Pandy Ryuna President					by -	By Paul Kautz					
- Kandy Bruno	1 P	resider	ide		T:11 -						
Printed Name May 17, 1993	a	15/6 <u>85-</u>		3	Title						
Date 17, 1993		Teleph						and the same and the same		and a same specification of	

- 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.