Submit 5 Copies
Appropriate District Office
DISTRICT I
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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.	1	O I HAIN	SPURT OIL	AND INA	OTTAL GA		A DI NIO			
Operator Earl R. Bruno	entor Earl R. Bruno Co.						APINO. 1-025-11467			
Address P.O. Box 590 Midland, Texas 79702										
	iru i anu,	Texas	7 37 02	Othe	r (Please expla	in)				
Newsonia) for 1 and Conserve Proper conf										
New Well Change in Transporter of: -Recompletion Dry Gas										
Recompletion	Oil									
Change in Operator										
and address of previous operator Edri R. Bruno F.O. BOX 330 Midiand, Texas 73702										
II. DESCRIPTION OF WELL	<u>AND LEA</u>	<u>SE</u>				1			N1.	
Lease Name Wells B-6				Federal or Fee LC 052956(E)						
Location A 330 - Fast										
Unit Detter : Feet From the :										
Section 6 Township 25S Range 37E , NMPM, LEG County										
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS										
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)										
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) Sid Richardson (arbon 4 Gasoline Co. 201 Main Street Ft. Worth, TX. 76/02										
	,	Soc. Tw	p. Rge.	Is gas actually		When	1000 111	+ 1/11	37030	
If well produces oil or liquids, give location of tanks.	Unit 	360.	р. Кас	is gas accuracy	Ve5		N/A			
If this production is commingled with that f	rom any othe	r lease or pool	, give commingli	ing order numb	er!		<u>,</u>			
IV. COMPLETION DATA	New Well		Deepen	Plug Back	Same Res'v	Diff Res'v				
Designate Type of Completion -	· (X)	Oil Well	Gas Well	,					i	
Date Spudded	Ready to Prod.		Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	ducing Forma	lucing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations							Depth Casing Shoe			
rendianous										
TUBING, CASING AND					CEMENTING RECORD					
HOLE SIZE	CAS	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
The second of th	T FOR A	LLOWADI	TC .							
V. TEST DATA AND REQUES	I FOR A	LLUWADI	uE ad all and must	he equal to or	exceed top allo	wable for thi	s depih or be f	or full 24 hou	rs.)	
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.)										
							Choke Size			
Length of Test	Tubing Pressure			Casing Pressure						
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF			
GAS WELL	l			1						
Actual Prod. Test - MCF/D	Length of T	est		Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pres	sure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE							A = 1 = 2 : 1			
		OIL CONSERVATION DIVISION								
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						_1				
				Date Approved						
Kandy Bunt				Orig. Signed by By Paul Kautz						
Signature Randy Bruno Prod. Mgr.				-, _			Geologist			
Printed Name 11/4/92	(Tir 915/685 -	le	Title	<u> </u>					
Date		Telepho	ne No.							

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.