

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion
ARTESIA, OFFICE

Form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered to the stock tanks. Gas must be reported on 15.025 psi at 60° Fahrenheit.

Artesia, New Mexico 3-11-63
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

International-Yates, State 648, Well No. 189, in SW 1/4 SW 1/4,
(Company or Operator) (Lease)

M, Sec. 11, T. 19-S, R. 28-E, NMPM, East Millman Queen-Grayburg Pool
Letter

Eddy County. Date Spudded 11-22-62 Date Drilling Completed 12-26-62

Please indicate location:

Elevation 3540' GL Total Depth 2265' PBD 2263'

Top Oil/Gas Pay 1798 Name of Prod. Form. Queen & Grayburg

PRODUCING INTERVAL -

Perforations 1798-1804; 1821-24; 1833-36; 2030-33; 2046-49; 2078-81; 2086-89; 2191-94; 2203-24 Depth 06'
Open Hole None Casing Shoe 2264' Tubing 1975'

OIL WELL TEST -

Natural Prod. Test: 2 1/2 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size - Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 19 bbls. oil, 2 bbls water in 24 hrs, 0 min. Size - Choke

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/1250 gals. acid, 64,000 lb. sand & 2077 bbls. lease crude.

Casing Tubing Date first new
Press. 40 psi Press. pump oil run to tanks March 10, 1963

Oil Transporter Continental Pipe Line Co.

Gas Transporter Phillips Petroleum Co.

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved MAR 14 1963, 19.

International-Yates
(Company or Operator)

By: Jack B. Sandler
(Signature)

Title District Engineer
Send Communications regarding well to:

Name International-Yates

Address P. O. Box 427, Artesia, New Mexico

OIL CONSERVATION COMMISSION

M. L. Armstrong
OIL AND GAS INSPECTOR

OIL CONSERVATION COMMISSION
ACTING SECRETARY

1. Name of the person or organization	6
2. Address	
3. City	
4. State	
5. Zip	
6. Date of birth	
7. Date of death	
8. Date of marriage	
9. Date of divorce	
10. Date of remarriage	
11. Date of remarriage	
12. Date of remarriage	
13. Date of remarriage	
14. Date of remarriage	
15. Date of remarriage	
16. Date of remarriage	
17. Date of remarriage	
18. Date of remarriage	
19. Date of remarriage	
20. Date of remarriage	

NUMBER OF COPIES RECEIVED	
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SANITARY	FILE
U.S.G.S.	LAND OFFICE
TRANSPORTER	OIL
PRODUCTION OFFICE	GAS
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator International-Yates				Lease State 648		Well No. 189	
Unit Letter M	Section 11	Township 19-S	Range 28-E	County Eddy			
Pool East Millman Queen-Grayburg				Kind of Lease (State, Fed, Fee) State			
If well produces oil or condensate give location of tanks			Unit Letter B	Section 14	Township 19-S	Range 28-E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Continental Pipe Line Company				Address (give address to which approved copy of this form is to be sent) P.O. Box 367, Artesia, New Mexico			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Phillips Petroleum Company			Date Connected Sept., 1960	Address (give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma			

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

New Well ☒
Change in Transporter (check one)
Oil ☐ Dry Gas ☐
Casing head gas . ☐ Condensate. . ☐

Change in Ownership ☐
Other (explain below)

RECEIVED
MAR 14 1963
DISTRICT ENGINEER

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 13th day of March, 1963.

OIL CONSERVATION COMMISSION		By
Approved by	<i>M. L. Armstrong</i>	<i>Jack B. Smith</i>
Title		District Engineer
Oil and Gas Inspector		Company International-Yates
Date	Address P.O. Box 427, Artesia, New Mexico	

MAR 14 1963