

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83

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PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Harvey E. Yates Company ✓

Address
P.O. Box 1933, Roswell, New Mexico 88202

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name South Taylor 13 Federal	Well No. 2	Pool Name, including Formation East Shugart Delaware	Kind of Lease State, Federal or Fee Fed	Lease No. NM 2537
Location Unit Letter <u>P</u> 330 : <u>330</u> South Feet From The <u>South</u> 330 Line and <u>East</u> 330 Feet From The <u>East</u>				
Line of Section <u>13</u> Township <u>18S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2436, Abilene, Texas 79604			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1959, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks. Unit: P, Sec: 13, Twp: 18S, Rge: 31E	Is gas actually connected? Yes	When 2-23-88	Post ID-2 3-25-88 comp 4 BK	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.



Production Manager/Engineer Skh
(Title)
3-15-88
(Date)

OIL CONSERVATION DIVISION

MAR 21 1988

APPROVED: _____, 19 _____

BY: _____ Original Signed By

Mike Williams

TITLE: _____ Oil & Gas Inspector

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filled for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back 5410	Same Res'v.	Diff. Res'v.
Date Spudded 12-30-87	Date Compl. Ready to Prod. 2-29-88		Total Depth 5448' MD		P.B.T.D. 5410				
Elevations (DF, RKB, RT, GR, etc.) 3715.2	Name of Producing Formation DELAWARE		Top Oil/Gas Pay 5310		Tubing Depth 5085				
Perforations 5380-90', 5310-30'						Depth Casing Shoe 5448			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11		8 5/8"		356		260 sx Cl "A" w/2% CALC cir 80			
7 7/8		5 1/2"		5448		1350 sx filler & Cl "A" Neat			
		2 7/8		5085					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 2-29-88	Date of Test 3-9-88	Producing Method (Flow, pump, gas lift, etc.) Pump		
Length of Test 24 hrs.	Tubing Pressure —	Casing Pressure —	Choke Size —	
Actual Prod. During Test	Oil - Bbls. 27	Water - Bbls. 21	Gas - MCF 25	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size