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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

48904

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

RECEIVED

NOV 13 1992

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator YATES PETROLEUM CORPORATION		Well API No. 30-01197019
Address 105 South 4th St., Artesia, NM 88210		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pauline ALB State	Well No. 4	Pool Name, including Formation Wildcat Delaware	Kind of Lease State, Federal or Fed	Lease No. V-3589
Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>32</u> Township <u>23S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County				

EOTT Energy Operating LP

Name of Authorized Transporter of Oil Enron Oil Trading & Transportation Corp.		Address (Give address to which approved copy of this form is to be sent) PO Box 1188, Houston, TX 77151-1188		
Name of Authorized Transporter of Casinghead Gas Yates Petroleum Corporation		Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210		
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 32	Twp. 23	Rge. 31
Is gas actually connected? Yes		When? 11-3-92		

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 10-8-92	Date Compl. Ready to Prod. 11-10-92		Total Depth 8110'		P.B.T.D. 7950'			
Elevations (DF, RKB, RT, GR, etc.) 3367' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 7741'		Tubing Depth 7692'			
Perforations 7741-7864'					Depth Casing Shoe 8110'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		40'		Red Mix			
17 1/2"	13-3/8"		500'		525 - circulated			
11"	8-5/8"		3986'		1650 - circulated			
7-7/8"	5-1/2"		8110'		1400 - circulated			

V. TEST DATA AND REQUEST FOR ALLOWABLE /2-7/8" @ 7692' /

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 11-3-92	Date of Test 11-10-92	Producing Method (Flow, pump, gas lift, etc.) Flowing	20
Length of Test 24 hrs	Tubing Pressure 280	Casing Pressure PKR	Choke Size 18/64"
Actual Prod. During Test 249	Oil - Bbls. 200	Water - Bbls. 49	Gas - MCF 218

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

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

JG
m19
Signature
Juanita Goodlett - Production Supvr.
Printed Name
11-11-92
Date
(505) 748-1471
Title
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 30 1992

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.