

*Confidential*

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., Aztec, NM 87410

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Yates Petroleum Corporation		Well API No. 30-043-20832
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 Henry AGC Federal	Well No. 1	Pool Name, Including Formation Alamito Gallup Ext.	Kind of Lease /State, Federal or Fed	Lease No. NM 36943
Location Unit Letter <u>D</u> : <u>860</u> Feet From The <u>North</u> Line and <u>590</u> Feet From The <u>West</u> Line Section <u>29</u> Township <u>23N</u> Range <u>7W</u> , NMPM, <u>Sandoval</u> County				

#### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Giant Refining Co. <input checked="" type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 256, Farmington, NM 87401				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/>	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 29	Twp. 23N	Rge. 7W	Is gas actually connected? No	When ?

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 7-28-89	Date Compl. Ready to Prod. 9-21-89 8-30-89	Total Depth 5425'	P.B.T.D. 5338'					
Elevations (DF, RKB, RT, GR, etc.) 6903' GR	Name of Producing Formation Gallup	Top Oil/Gas Pay 4914'	Tubing Depth 4810'					
Perforations 4914-5185'	Depth Casing Shoe 5423'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12 1/2"	8-5/8"		277'			180 sx		
7-7/8"	4 1/2"		5423'			885 sx		
	2-3/8"		4810'					

#### V. TEST DATA AND REQUEST FOR ALLOWABLE

**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 8-30-89	Date of Test 9-21-89	Producing Method (Flow, pump, gas lift, etc.) Pumping
Length of Test 24 hrs	Tubing Pressure	Casing Pressure
Actual Prod. During Test 29	Oil - Bbls. 24	Water - Bbls. 5

**RECEIVED**  
8  
SEP 26 1989

#### 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 <b>DIST. 3</b>

#### 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.

*Juanita Goodlett*  
Signature  
Juanita Goodlett - Production Supvr.  
Printed Name  
9-22-89 Date  
505/748-1471 Telephone No.

OIL CONSERVATION DIVISION

Date Approved **SEP 26 1989**

By \_\_\_\_\_ Original Signed by FRANK T. CHAVEZ

Title \_\_\_\_\_ SUPERVISOR DISTRICT 3

**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.