

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78**CONFIDENTIAL**

until 8-25-85

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Yates Drilling Company

Address 207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nageezi Federal	Well No. 1	Pool Name, including Formation Wildcat Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM 23741
Location Unit Letter F; 1900 Feet From The North Line and 2150 Feet From The West Line of Section 19 Township 23N Range 8W, NMPM, San Juan 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77001					
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 F	Sec. 19	Twp. 23n	Rge. 8w	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

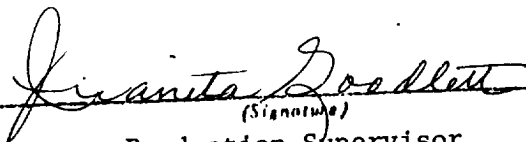
Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 4-21-85	Date Compl. Ready to Prod. 6-5-85 5-22-85		Total Depth 6067'		P.B.T.D. 5183'			
Elevations (DF, RAB, RT, GR, etc.) 6926' GR	Name of Producing Formation Gallup		Top Oil/Gas Pay 4888'		Tubing Depth 5068'			
Perforations 4888-5024'					Depth Casing Shoe 5243'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		273'		180			
7-7/8"	5-1/2"		5243'		1310			
	2-7/8"		5068'					

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)

OIL WELL		Producing Method (Flow, pump, gas lift, etc.) Pumping	
Date First New Oil Run To Tanks 5-22-85	Date of Test 6-5-85	Casing Pressure 20	Choke Size -
Length of Test 24 hrs	Tubing Pressure 20	Water-Bbls. 1	Gas-MCF 12
Actual Prod. During Test 51	Oil-Bbls. 50		
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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


(Signature)

Production Supervisor

6-6-85

(Date)

OIL CONSERVATION DIVISION

JUN 10 1985

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

SUPERVISOR DISTRICT #3

TITLE

This form is to be filed in compliance with RULE 110.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated 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 Form C-104 must be filed for each pool in multiple.