Submit 5 Cepies
Appropriate District Office
DISTRICT 1
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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

O RIO BIADO RU, AMO, MIN OTTO	REQUE	STFO	H ALL VSPO	RT OIL	.E AM	IATL	IRAL GAS	5		-				
TO TRANSPORT OIL AND NATURAL GA									Well API No. 30-025-23379					
YATES PETROLEUM COR	PORATIO	N												
105 South 4th St., A	rtesia	, NM	8821	0		Other	(Please explai	in)						
ason(s) for Filing (Check proper box)	c	hange in	Transpor	nter of:	_									
w Well	Oil	\mathbf{X}	Dry Gat	, []		Eff	ective D	ate)	: 2-1	-92				
ange in Operator	Casinghead	Gas 🗌	Conden	22(6										
hange of operator give name address of previous operator							<u></u>							
DESCRIPTION OF WELL AND LEASE										Lease No.				
are Name	Vame Well No. Pool Name, including					Formation Draw Permo Penn			Kind of Lease State, Federal or Fee		LG-2247			
Lonestar AAI State		1	E1g	tht Mile	Dra	w re	I IIIO I CIII							
ocation K	. 198	Λ	Tast E	rom The So	outh	Line	and19	80	Feet	From The	West	Line		
Unit Letter	:	<u> </u>	_ rea ri							Lea		County		
Section 19 Township	1	1S	Range	35E		, NM	IPM,			цеа		County		
I. DESIGNATION OF TRANS	ישימ אמי	D OF O	TT. AN	m natu	RAL C	SAS								
I. DESIGNATION OF TRANS lame of Authorized Transporter of Oil		of Coopie	ر) مجنو	מים מים			address to w	hich a	pproved o	opy of this fo	rm is 10 be sen	() R		
oron Oil Trading & Tra	nsperi	44	SY.	arp.	P.0	Be City	x 1188,	HO hich o	uston	opy of this fo	7151-118 rm is to be sen	1)		
lame of Authorized Transporter of Casing	head G	ecave	4-70	198	P.C). B	ox 1589,	Τι	lsa,	OK 741	01			
Warren Petroleum Co. well produces oil or liquids, Unit Sec. Twp.					ls gas	gas actually connected? Whe				4-4-85				
ve location of tanks.	K	19		S 35E		Yes				4-4-05	,			
this production is commingled with that i	from any oth	er lease o	r pool, g	rive comming	ling one	er num	Der:							
V. COMPLETION DATA		Oil We	.11	Gas Well	New	Well	Workover	7	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	i	İ_		<u>i</u>	5 .1	<u> </u>			DDTD	<u> </u>			
Date Spudded	Date Com	Date Compl. Ready to Prod.				Total Depth				P.B.T.D.	•			
	Name of Producing Formation				Top C	Top Oil/Gas Pay				Tubing Depth				
Elevations (DF, RKB, RT, GR, etc.)	ions (DF, RKB, RT, GR, etc.) Name of Producing Formation										Depth Casing Shoe			
Perforations										Depth Cash	ng Shoe			
•				DOLC AND	CEN	ENT	ING RECO	RD		<u> </u>				
		TUBING, CASING AND CASING & TUBING SIZE					DEPTH SE	T		SACKS CEMENT				
HOLE SIZE		ASING a	100111	<u>u oiee</u>						<u> </u>				
THE THE THE TENTE	CT FOR	ALLO	WARL	Æ								- 1		
V. TEST DATA AND REQUE OIL WELL (Test must be after	recovery of	Total volu	me of la	ad oil and m	usi be eq	ual to	or exceed top	allow	able for th	is depth or be	e for full 24 ho	<u>urs.)</u>		
Date First New Oil Run To Tank	Date of	Test			Prod	ucing !	Method (Flow	, рит	p, gas tyi,	eic.j	1			
	The bine is	C. L Deserte					Casing Pressure				Choke Size			
Length of Test	of Test Tubing Pressure										Gas- MCF			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.									
					l				. 					
GAS WELL		- 60			IBb	s. Con	densate/MMC	F		Gravity o	f Condensate			
Actual Prod. Test - MCF/D	Length	Length of Test									Choke Size			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Ca	Casing Pressure (Shut-in)				Cuoke 21/2				
1					-			 -	· · · · · · · · · · · · · · · · · · ·					
VI. OPERATOR CERTIF	ICATE	OF CC	MPL	IANCE			OIL C	ON	SER'	VATIO	N DIVIS	ION		
the transfer 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.						Date Approved					JAN 23'92			
				C										
Quanita Lo				(-	В					A SEXTON			
Signature Juanita Goodlett			n Su		_		•	DIS.	TRICT I	SUPERVIS	OR	•		
Printed Name		(505)		Fide -1471	∥	T	itle				· · · ·			
Date		(303)		hone No.	_									
<i></i>								_						

- 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
- 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.