Submit 5 Cepies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	O TRAN	SPO	RT OIL	AND NATUR	AL GAS	T 100 11 -	TNI-			
erator YATES PETROLEUM (Well AP	I No.			
iress			0014				<u> </u>				
105 South 4th St. son(s) for Filing (Check proper box)		, NM &	00410		Other (Ple	ase explain)					
w Well		Change in Tr	neport	ter of:						0.0	
completion	Oil		ry Gas		CHANG	E TRANS	PORTER	EFFECT	IVE 9-1	-90	
ange in Operator	Casinghead	Gas 🔲 C	ondens	alo 🔲							
nange of operator give name											
address of previous operator										,	
DESCRIPTION OF WELL		SE			Francisco		Kind of	Lesse	le le	ase No.	
sse Name Petrus AEO State		Well No. Pool Name, Includin 2 Sanmal Qu					State, Pederal by Free		B-2516		
retrus AEO State	1						_1				
cation	100	·	_	N	Jorth	1650	Page	From The	East	Line	
Unit LetterG	:198	<u> </u>	eet Fro	m The	North Line and	1030	ree	rioni ine			
Section 11 Towns	hip 17s	R	lange	33e	, NMPM,			Lea		County	
2001011 11 10411	17 D							-			
. DESIGNATION OF TRA	NSPORTE	R OF OIL	ANI	D NATU	RAL GAS						
me of Authorized Transporter of Oil Enron Oil Trading &					Address (Give add						
					PO Box 1						
lame of Authorized Transporter of Casinghead Gas 🔯 or Dry Gas				Gas	Address (Give add		rm 13 10 be se	nı)			
Warren Petroleum	1000	Unit Sec. Twp. Rge.				PO Box 1589, Tulsa, OK Is gas actually connected? When ?					
well produces oil or liquids, re location of tanks.	Unit 1 B	-	г wp . 17	Rge.	yes	ilexee i	1	11-6-87			
his production is commingled with the											
his production is communicate with the COMPLETION DATA	at none any our	er rease or p	~, g.,								
. COMILETION DATA		Oil Well		Jas Well	New Well Wo	rkover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completic	on - (X)		i		i i .	1.	1			_l	
ate Spudded		Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		
·					- AUIO - W			mai B d			
evations (DF, RKB, RT, GR, etc.)	Name of P	roducing For	mation		Top Oil/Gaa Pay			Tubing Dept	h		
					l			Depth Casing	g Shoe		
riorations									•		
		OMBIT	CASI	NO AND	CEMENTING	RECORD		<u>' </u>			
					DFI	TH SET		SACKS CEMENT			
HOLE SIZE	CA	CASING & TUBING SIZE									
									_,		
. TEST DATA AND REQU	JEST FOR A	ALLOWA	BLE						e enade.		
IL WELL (Test must be af	er recovery of to	otal volume o	of load	oil and mus	be equal to or exce	ed top allow	able for thi	s depin or be	OF JUL 24 NO	wr 5.)	
ate First New Oil Run To Tank	Date of To				Producing Method	ı (rıow, puny	p, gas iyi, t	<i>)</i>			
					Casing Pressure			Choke Size			
ength of Test	Tubing Pr	Tubing Pressure Oil - Bbls.				Water - Bbls.					
	Oil Bul-								Gas- MCF		
Actual Prod. During Test	OII - BOIS	OII - BDIS.									
GAS WELL		Tast			Bbls. Condensate	MMCF		Gravity of	Condensate		
Actual Prod. Test - MCF/D	of Test										
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure		Choke Size				
esting Method (pilot, vack pr.)		,									
VI. OPERATOR CERTI	FICATE O	F COME	PLIA	NCE			CEDV	ATION	חווופו	ON	
I hamby contifu that the rules and	regulations of th	ie Oil Consei	rvation			LUUN	OEK V	ATION	ופועוט	ON	
Division have been complied with	and that the inf	ormation giv	en abo	ve	11						
is true and complete to the best of	my knowledge	and belief.			Date A	pproved	t				
\bigwedge					} }						
Junta &					By		 	·		• : 1	
Juanita Goodlett			Supvi	r							
Printed Name			Title		Title_				·		
8-24-90	(505) 74	ephone								
Data		i el	CDNOR	170.	11						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 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.