

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF PERMITS RECEIVED	
DISTRICT	
SANTA FE	
FILE	
VEGA	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR
Harvey E. Yates Company
Address
P.O. Box 1933, Poswell, New Mexico 88202

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Gaslinehead Gas ☐ Condensate
 Other (Please explain): *show gas connection date*

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name Armedo A.G. 1 Federal	Well No. #1	Pool Name, Including Formation H. Young Bone Springs	Kind of Lease State, Federal or Fee Federal	Lease No. NM-44539
Location Unit Letter <i>D</i> <i>610</i> Feet From The <i>South</i> Line and <i>990</i> Feet From The <i>East</i> Line of Section <i>1</i> Township <i>18S</i> Range <i>32E</i> N.M.P.M. Loc <i></i> County <i></i>				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Pride Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2436, Abilene, Texas 79601
Name of Authorized Transporter of Gaslinehead Gas ☐ or Dry Gas ☐ Cenoco	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1959, Midland, Texas 79702
If well produces oil or liquids, give location of tanks. Unit <i>D</i> Sec. <i>1</i> Twp. <i>18</i> Rge. <i>32</i>	Is gas actually connected? <i>yes</i> when <i>12/27/88</i>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

IV. CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

APPROVED *DEC 30 1988*
BY **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR
TITLE

This form is to be filled in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation 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 Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED
12-29-88

OFFICE
SANTA FE

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OCD
HOBBS OFFICE