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

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

State of New Mexico nergy, Minerals and Natural Resources Depar

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page	54
	W

000 Rio Brazos Rd., Aziec, NM 87410	REQU	JEST FO	OR A	ALL(BAWC	SLE AND	AUTHORIZ	ZATION					
• Operator		TO THA	NOF	-UF	11 UIL	ANU UNA	TURAL GA	Well A	PI No.				
YATES PETROLEUM CORPORATION ✓							30-015-26586						
Address 105 South 4th St.,	Artesi	a, NM	882	210									
Reason(s) for Filing (Check proper box)						Oth	er (Please expla	iin)					
New Well		Change in			r of:	DDT	10m T 11 0	1 00					
Recompletion	Oil	_	Dry (님	EFFF	ECTIVE 2-	-1 - 82					
Change in Operator	Casinghea	d Gas	Cond	iensat	e <u> </u>								
f change of operator give name nd address of previous operator	· ·												
I. DESCRIPTION OF WELL	AND LE	ASE							·	- 1 - •			
Lease Name		Well No.				ng Formation			of Lease Federal pr/Fb		e ase No. .673		
Lost Tank AIS State		3	L	ost	Tank	Delawan	re						
Location Unit LetterN	. 6	60	Feet	Fmm	The	South Lin	e and 198	30 Fe	et From The	West	Line		
Olik Deliai									1.1		County		
Section 36 Townshi	p 21S	<u> </u>	Rang	ge	31E	, N	МРМ,	<u>Eo</u>	ldy		County		
II. DESIGNATION OF TRAN	ISPORTE	ER OF O	IL A	ND	NATU	RAL GAS		···		 			
Name of Authorized Transporter of Oil	EXCATT 1	or Conde	sate	atib.	a) P	Address (Giv	ve address to wi						
Enron Oil Trading & T	ranspor	tation		1	•		<u> 1188, F</u>						
Name of Authorized Transporter of Casin	ghead Gas	XX	of D	fy Ga	16	1	ve address to whomas 4 th, A				:ru)		
Yates Petroleum Corpo: If well produces oil or liquids,	Unit	Sec.	Twp	<u>, l</u>	Rge.	Is gas actual		When		<u> </u>			
give location of tanks.	i N	36	2	1	31	Yes			7-18-91				
f this production is commingled with that	from any of	her lease or	pool,	give (comming	ling order num	iber:						
V. COMPLETION DATA		Oil Wel	, 1	Gar	s Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	Oil Wel	`	Gai	B WCII	New Well	1 TOIROVOI				_i		
Date Spudded	Date Con	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas	Pay		Tubing Dep	Tubing Depth				
Perforations					Depth Casing Shoe								
1 Citorations													
	TUBING, CASING AND				CEMENT								
HOLE SIZE	CASING & TUBING SIZE			-	DEPTH SET			SACKS CEMENT					
	_												
						-							
	 												
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABL	Æ				lawahla fa a th	in death or be	for full 24 hou	are)		
OIL WELL (Test must be after	recovery of	total volum	e of lo	ad oil	and mus	Producing N	nethod (Flow, p	owavie jor in	elc.)	JOF JIEL 24 1101			
Date First New Oil Run To Tank	Date of T	CN				, , , , , , , , , , , , , , , , , , ,							
Length of Test	Tubing P	ressure				Casing Pres	sure		Choke Size	•			
						Water - Bbl	8.		Gas- MCF				
Actual Prod. During Test	Oil - Bbl	S.				., 5 501							
GAS WELL													
Actual Prod. Test - MCF/D	Length o	of Test				Bbls. Cond	ensate/MMCF		Gravity of	Condensate			
	Tubing Pressure (Shut-in)				Casino Drae	ssure (Shut-in)		Choke Siz	e				
Testing Method (pitot, back pr.)						(-114-14)							
VI. OPERATOR CERTIFIC	CATE)F COM	PLI	AN	CE		011 00	NOED!	/ATION	יטוארטי	ON		
I hereby certify that the rules and reg	ulations of t	he Oil Cons	ervatio	on			OIL CO	N2FH/	AHUN	ופועוטו	ON		
Division have been complied with an is true and complete to the best of m	id that the in	formation g	iven a	bove		∥ . Dat	te Approv	ed	FEB 1	1 1992			
										ALEC OV			
	deir			,_		Ву		ORIO	SINAL SIG	NED BY	<u> </u>		
Juanita Goodlett	- Produ	ction						SUP	ERVISOR.	DISTRICT	T II		
Printed Name			Tit	41.4							-		
1-27-92	((505) 7			1	Titl	e		regis or				

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.