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

## State of New Mexico argy, 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

	T	O TRAI	NSPC	ORT OIL	AND NAT	URAL GA	S_ <del></del>	N No.				
Operator	r						Well Al					
YATES PETROLEUM CORPORATION						30-025-32188						
Address		ans o	0010									
105 South 4th St., Ar	tesia,	NM 8	8210		Other	(Please explain	n)					
Reason(s) for Filing (Check proper box)	,	hange in	Lesuco	rter of:	[_] OL.(0.	(	,					
New Well			Dry Ga	F . 1						į		
Recompletion  Change in Operator	Oil Casinghead		Conden	_								
Change in Operator	Casingicad				MELL MAG	OFFAL DUAGE	O IN THE	<b>800</b> 1				
and address of previous operator						BEEN PLACE						
II. DESCRIPTION OF WELL A	FY THIS OF					Ne						
Lease Name Well No. Pool Name, Including						g i officiation			Kind of Lease No.  State, Federal or Fee			
Childress AKV		1	Sau	ınders I	Permo Up	ermo Upper Penn 777						
Location						0.04	•		TIS of	Line		
Unit Letter M	conth 330 parame West											
						) n (m (			Lea County			
Section 1 Township	14	<u>S</u>	Range	33E_	, NN	лрм,		ட்டம்				
		OF O	T A TAI	וו דיר גוא בוו	DAT GAS							
III. DESIGNATION OF TRANS	SPURIE	or Conden	sale	וח דענו חו	Address (Civ	e address to wh	ich approved	copy of this fo	orm is to be se	nt)		
FORT Francy Corporation Energy Operating LP						Address (Give address to which approved copy of this form is to be sent) PO Box 1188, Houston, TX 77251-1188						
Name of Authorized Transporter of Casinghead Gas  Effective 4-1-94 or Dry Gas A						Address (Give address to which approved copy of this form is to be sent)						
Warren Petroleum Corporation					PO Box	x 1589, I	ulsa, O	74101				
well produces oil or liquids, Unit Sec. Twp.				Rge.	Is gas actually connected? Whe			1-14-94				
give location of tanks.	M	1	14s	33e								
If this production is commingled with that	from any othe	er lease or	pool, gi	ve commingl	ing order num	Der:						
IV. COMPLETION DATA		10:: ***		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	Oil Well	.   	Gas Well	New Well	, SIROVOI			İ	_l		
		1	l_ o Prod.		Total Depth	.L		P.B.T.D.				
Date Spudded	Date Comp	Date Compl. Ready to Prod. 2-4-94				10123'			10070'			
11-13-93 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay				Tubing Depth			
4184 GR	Permo Penn				9901'				10035'			
Perforations									Depth Casing Shoe			
9901-9918'; 10001-10013'						101						
	T	TUBING, CASING AND				CEMENTING RECORD			SACKS CEMENT			
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			Redi-Mix			
26"		20"				405'			425 sx - circulated			
17-1/2"		13-3/8"				4130'			1500 sx - circulated			
12-1/4"	9-5/8"				10123'			1500	1500 sx DV @ 7444'			
8-3/4"	CT EOD A	TIOI	ARLI	È /2-7	/011 0100	1251/						
V. TEST DATA AND REQUE OIL WELL (Test must be after	SI FUK A	add volum	e of loa		the equal to o	r exceed top al	lowable for th	is depth or be	for full 24 ho	urs.)		
OIL WELL (Test must be after Date First New Oil Run To Tank	Producing N	nemod (riow, p	ump, gas lift,	etc.)								
Date First New Oil Run 10 Tank	Date of Test 2-4-94					mping		C -1- C	Choke Size			
Length of Test		Tubing Pressure				Casing Pressure			Choke Size			
24 hrs		130				-			Gas- MCF			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.				Water - Bbis. 104			129			
181		77			10,	<del></del>			<del></del>			
GAS WELL			_					Convince	Condensate			
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate				
	(6)				Casing Pressure (Shut-in)			Choke Size				
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Freesure (Shur-in)							
				NOT	<del></del>			··				
VI. OPERATOR CERTIFIC	CATE C		ii i∟l/	VINCE		OIL CO	NSER\	/ATION	I DIVISI	ON		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						FED 11 1834						
is true and complete to the best of my knowledge and belief.					l Da	. , – –						
						Date Approved						
Cumita Doolless					By	P	But Kind	ř				
							reo legan					
Juanita Goodlett - Production Supervisor												
Printed Name 2-8-94 505/748-1471						e						
Date		7	elephor	ne No.								

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.