Submit 5 Copies
Appropriate District Office
DISTRICT I 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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

3755/

DISTRICT III

Santa Fe, New Mexico 87504-2088 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. YATES PETROLEUM CORPORATION 30-005-60428 Address 105 South 4th St., Artesia, NM 88210 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Effective Date: January 1, 1991 Recompletion Dry Gas Oil Change in Operator Casinghead Gas Condensate If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Lease Lease No. Federal HJ Linda - SA State. (Federal) or Fee NM-2357 Location 330 Feet From The North Line and Unit Letter 1650 East Feet From The Line 6S Township 26E Range NMPM, <u>C</u>haves County DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Energy Compderess (Give address to which approved copy of this form is to be sent) X Address (Give address to which approved copy of this form is to be sent) Enron Oil Trading & Transporta Name of Authorized Transporter of Casinghead Gas If well produces oil or liquids, Unit Twp. Sec. Rge. Is gas actually connected? When? give location of tanks. I B 31 **6**S 126E NO If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well | Workover Designate Type of Completion - (X) Deepen Plug Back | Same Res'v Diff Res'v Date Spudded Date Compi. Ready to Prod. Total Depth P.B.T.D. Elecations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Periorations Depth Casing Shoe 190 TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE **DEPTH SET** SACKS CEMENT CIESIA, OLITE V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Choke Size - :-Actual Prod. During Test Oil - Bbls. ON OIL GARAGE- TAX Water - Bbls **GAS WELL** Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Conden Testing Method (puot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify 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 DEC 1 4 1990 ORIGINAL SIGNED BY Signature Juanita Goodlett By. MIKE WILLIAMS Production Supvr. Printed Name 12-14-90 SUPERVISOR DISTRICT IT Title Title. (505)748-1471 Telephone 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
- 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