

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

RECEIVED

AUG 07 1981

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	1
PRODUCTION OFFICE	
Operator	

Yates Petroleum Corporation /

Address
207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 10-1-81
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED
Ex # 2-563

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Tamarack "QF" State	Well No. 1	Pool Name, Including Formation Linda San Andres	Kind of Lease State, Federal or Fee LG-3591 State	Lease State
Location Unit Letter <u>D</u> : <u>330</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u> Line of Section <u>32</u> Township <u>6S</u> Range <u>26E</u> , NMPM, Chaves				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 32	Twp. 6S	Rge. 26E	Is gas actually connected? No	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff.
Date Spudded 5-1-81	Date Compl. Ready to Prod. 7-25-81	Total Depth 1250'	P.B.T.D. 1207'					
Elevations (DF, RKB, RT, GR, etc.) 3658' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 969'	Tubing Depth 951'					
Perforations 969-990'	Depth Casing Shoe 1250'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	10-3/4"	350'	350
9-1/5"	7"	798'	1270
6-1/4"	4-1/2"	1250'	130
	2-3/8"	951'	

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top
table for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 7-25-81	Date of Test 8-4-81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 20#	Casing Pressure 20#	Choke Size 2"
Actual Prod. During Test 6	Oil-Bbls. 4	Water-Bbls. 2	Gas-MCF 1

AS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Sealing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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.

Engineering Secretary

8-7-81

(Signature)

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 10 1981, 19

BY W.A. Gussert

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep
well, this form must be accompanied by a tabulation of the dev
tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for
able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of
well name or number, or transporter, or other such change of condi

Separate Forms C-104 must be filed for each pool in ma