

SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

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JUL 23 1975

O. C. C.
ARTESIA, OFFICE

I. Operator
S. P. Yates
Address
207 South 4th Street - Artesia, New Mexico 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)
207 South 4th Street
If change of ownership give name and address of previous owner Yates Petroleum Corporation - Artesia, New Mexico 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name Spurck F State Well No. 3 Pool Name, Including Formation Red Lake Kind of Lease State, Federal or ~~Lease~~ State Lease No. 8617
Location
Unit Letter E ; 2310 Feet From The North Line and 990 Feet From The West
Line of Section 15 Township 17S Range 28E Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Crude Oil Purchasing Co Address (Give address to which approved copy of this form is to be sent)
North Freeman Ave-Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum Corporation Address (Give address to which approved copy of this form is to be sent)
P. O. Box 6666-Odessa, TX 79760
If well produces oil or liquids, give location of tanks. Unit P Sec. 15 Twp. 17S Rge. 28E Is gas actually connected? Yes When July 1960

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

IV. COMPLETION DATA

Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. 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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 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. Water-Bbls. Gas-MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

Christine Tomlinson
(Signature)
Christine Tomlinson-Geol. Secretary
(Title)
7-22-75
(Date)

OIL CONSERVATION COMMISSION

JUL 23 1975

APPROVED BY W. A. Gressett 19
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 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.