

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

Form C-104
(Revised 7/1/52)

REQUEST FOR (OIL) - (~~NEW~~) ALLOWABLE

New Well
~~EXISTING WELL~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form G-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico April 3, 1957
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: NW
Western-Yates State 647 Tract 7, Well No. 137, in NE 1/4 SE 1/4,
(Company or Operator) (Lease)
J Unit Letter, Sec. 35, T. 17S, R. 28E, NMPM., Artesia Pool
Eddy County. Date Spudded 2-9-57, Date Completed drlg. 3-13-57

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Diagram showing location of well in Section 35, Township 17S, Range 28E. The well is located in the center of the section, marked with a dot and labeled 'J'. Arrows indicate the well is 1980' from the north and 1980' from the east.

Elevation 3666 DF Total Depth 2634' P.B. 2525'

Top oil/gas pay 2180' Name of Prod. Form Grayburg

Casing Perforations: 2180-90, 2300-08, 2336-42, 2433-37, or 2439-43, 2470-77

Depth to Casing shoe of Prod. String 2525'

Natural Prod. Test 5 gallons per hour ~~XXXX~~

based on frac bbls. Oil in 50 Hrs. Mins.

Test after ~~XXXX~~ 50 BOPD

Based on 50 bbls. Oil in 24 Hrs. Mins.

Gas Well Potential ---

Size choke in inches open 2" tbg.

Date first oil run to tanks or gas to Transmission system: April 1, 1957

Transporter taking Oil or Gas: Malco Ref., Inc. (Pipe Line Div.)

Casing and Cementing Record

Size Feet Sax

8 5/8	577	75
4 1/2	2525	300
2" tbg.	2409	79 lbs.

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: APR 4 1957, 19.

OIL CONSERVATION COMMISSION

By: M. L. Armstrong
Title: OIL AND GAS INSPECTOR

Western-Yates

(Company or Operator)

By: P. A. Hanson
(Signature)

Title: Dist. Supt.

Send Communications regarding well to:

Name: Western-Yates

Address: P.O. Box 445, Artesia, N.M.

OIL COMPANY		OIL FIELD		OIL FIELD	
NAME		NO.		DATE	
ADDRESS		TYPE		STATUS	
PRODUCT		QUANTITY		PRICE	
DATE		TIME		LOCATION	
NAME		NO.		DATE	
ADDRESS		TYPE		STATUS	
PRODUCT		QUANTITY		PRICE	
DATE		TIME		LOCATION	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Western-Yates Lease State 647 Tract 7

Well No. 137 Unit Letter J S 35 T 17S R 28E Pool Artesia

County Eddy Kind of Lease (State, Fed. or Patented) State 647

If well produces oil or condensate, give location of tanks: Unit J S 35 T 17 R 28

Authorized Transporter of Oil ~~xxx Goodensate~~ Malco Refineries, Inc. (Pipe Line Div.)

Address P. O. Box 125, Artesian New Mexico
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas none

Address _____
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

No pipe line connection

Reasons for Filing: (Please check proper box) New Well XX ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other _____ ()

Remarks: _____
(Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 3 rd day of April 1957

By L. G. L. Sanborn

Approved APR 4 1957 1957

Title Dist. Supt.

OIL CONSERVATION COMMISSION

Company Western-Yates

By M. L. Armstrong

Address P. O. Box 445

Title OIL AND GAS INSPECTOR

Artesia, N. M.

U.S. CUSTOMS AND BORDER PROTECTION

DECLARATION OF EXPORTER

Name of Exporter _____

Address of Exporter _____

City _____ State _____ Zip _____

Country of Origin _____

Country of Destination _____

Commodity _____

Quantity _____

Value _____

U.S. Tariff _____

Transit _____

File _____