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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
**RECEIVED**  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
MAR 19 1975

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

O.C.C.  
ARTESIA OFFICE

Operator Yates Petroleum Corporation	
Address 207 South 4th Street - Artesia, NM 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "DF"	Well No. 1	Pool Name, Including Formation Collins Ranch Undesignated (Abo) WC	Kind of Lease State, Federal or Fee State	Lease No. K-4042
Location Unit Letter 'D'; 660 Feet From The North Line and 660 Feet From The West				
Line of Section 35 Township 17S Range 24E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Navajo Crude Oil Purchasing Company	No. Freeman Ave-Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Yates Petroleum Corporation	207 South 4th Street-Artesia, NM 88210	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 35
	Twp. 17S	Rge. 24E
	Is gas actually connected? Yes	
	When 3-15-75	

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.
		X		X				X
Date Spudded 2-28-75	Date Compl. Ready to Prod. 3-6-75		Total Depth COTD 8195		P.B.T.D. 6520'			
Elevations (DF, RKB, RT, GR, etc.) 3734' KB	Name of Producing Formation Upper Basal Abo Welfcamp		Top Oil/Gas Pay 4926'		Tubing Depth 4888'			
Perforations 4926-4971'					Depth Casing Shoe 8191			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
15"	13-3/8"	125'		250 sacks				
12"	8-5/8"	1795'		1100 sacks				
7-7/8"	4 1/2"	8191'		820 sacks				
	2" EUE	4888'						

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 900	Length of Test 3 hrs	Bbls. Condensate/MMCF None	Gravity of Condensate -
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1580	Casing Pressure (Shut-in) -	Choke Size 1/2"

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.

OIL CONSERVATION COMMISSION MAR 19 1975	
APPROVED	19
BY	W.A. Grissett
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.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.

Eddie M. Mahfood  
(Signature)  
Eddie M. Mahfood - Engineer  
(Title)  
3-18-75  
(Date)