NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE		1		
FILE		7-		
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS			
OPERATOR		3		
PROPATION OF				

NEW MEXICO OIL CONSERVATION COMMISSION

Form C = 1.04

	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65		
	U.S.G.S.	AND				
	IRANSPORTER OIL		,	RECEIVED		
1.	OPERATOR 3			um n 2 1967		
	Yates Petroleum Cor	poration		O. C. C.		
		07 So. 4th Street-Yates Building-Artesia, New Mexico 88210				
	eason(s) for filing (Check proper box) www.Well X Change in Transporter of:					
	Recompletion Change in Ownership	Oil Dry Go Casinghead Gas Conder	─ ─			
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Ng	me, Including Formation	Kind of Lease		
	Jackson "AT"	ļ ļ	le Creek S. A.	State, Federal or Fee Fee		
		O Feet From The South Lin	ne and 2310 Feet F	rom The West		
	Line of Section 14 , To	wnship 17S Range	25E , NMPM,	Eddy County		
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)					
	The Permian Corpor	ation		Midland, Texas		
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which a	pproved copy of this form is to be sent)		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. N 14 17S 25E	Is gas actually connected?	When		
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:			
. .	Designate Type of Completic	on - (X) Oil Well Gas Well	New Well Workover Deeper	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded 5-16-67	Date Compl. Ready to Prod. 6-23-67	Total Depth 1490	P.B.T.D.		
	Pool Eagle Creek S.A.	Name of Producing Formation San Andres	Top Oil/Gas Pay 1325'	Tubing Depth 1300 •		
	Perforations 70/1325-1370			Depth Casing Shoe		
			CEMENTING RECORD	5.000 05.05.0		
	HOLE SIZE	CASING & TUBING SIZE 8-5/8."	1165'	SACKS CEMENT		
	7-7/8"	5 ¹ ₅ "	1490'	200		
		23/8	/300			
v.	EST 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 well. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable.)					
	Date First New Oil Run To Tanks 6-23-67	Date of Test 6-24-67	Producing Method (Flow, pump, go	as lift, etc.)		
	Length of Test	Tubing Pressure	Pumping Casing Pressure	Choke Size		
	Actual Prod. During Test 55	Oil-Bbls.	Water-Bbls. 30 LW	Gas-MCF TSTM		
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size		
VI. CERTIFICATE OF COMPLIANCE			RVATION COMMISSION			
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.			APPROVED			
			TITLE			
	ML anuste	MLanufle orig		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		
	Agent	(100)		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow		
	6-29-67		able on new and recompleted Fill out Sections I, II,	i wells. III, and VI only for changes of owner,		

(Date)

Fill out Sections I, II, III, and VI only 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 multiply