

DISTRIBUTION	2	NEW MEXICO OIL CONSERVATION COMMISSION	Form C-104
SANTA FE	1	REQUEST FOR ALLOWABLE	Superseding Old C-104 and C-11
FILE	1	AND RECEIVED	Effective 1-1-65
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
LAND OFFICE		APR - 2 1979	
TRANSPORTER	OIL 7 GAS 7	O. C. C.	
OPERATOR	2	ARTESIA, OFFICE	
PRODUCTION 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 <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner	

DESCRIPTION OF WELL AND LEASE			
Lease Name J Lazy J	Well No. 1	Pool Name, including Formation Eagle Creek S. A.	Kind of Lease State, Federal or Fee Fee
Lease No.			
Location			
Unit Letter H ; 2310 Feet From The North Line and 330 Feet From The East			
Line of Section 22 Township 17S Range 25E , NMPLM, Eddy County			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input 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 checked="" type="checkbox"/> or Dry Gas <input 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 H	Sec. 22	Twp. 17S, Rge. 25E
			Is gas actually connected? Yes
			When 2-28-73

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	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

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 (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION 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 APR 4 - 1979
Christine Tomlinson-Geol. Secty.	BY W.A. Gressett
3-30-79	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 completed 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.