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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

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

AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FEB 3 1971

O. C. C.

ARTESIA OFFICE

Operator
Yates Petroleum Corporation

Address
207 South 4 th 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)

If change of ownership give name
and address of previous owner

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 30-1-1971
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED
Exception #2-14
dated 3-26-71

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jackson AT	Well No. 3	Pool Name, Including Formation Eagle Creek S. A.	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter K ; 1650 Feet From The South Line and 2310 Feet From The West Line of Section 14 Township 17S Range 25E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock Oil Company	Address (Give address to which approved copy of this form is to be sent) 414 Mid-America Bldg. Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 14	Twp. 17S	Rge. 25E	Is gas actually connected? No	When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-2-71	Date Compl. Ready to Prod. 1-28-71	Total Depth 1487	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3492' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 1313.5	Tubing Depth 1293'					
Perforations 1313.5, 1316.5, 1321, 1331-37, 1340-45, 1358, 1363, 1367, 1372, 1374, 1410.5, 1413, 1421, 1423, 1430'	Depth Casing Shoe 1487'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
9 7/8"	7" 23#		1150'		450 sacks			
6 1/4"	4 1/2" 9.5#) Tapered		452')		150 sacks			
	5 1/2" 15.5#)		1035')					

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 1-28-71	Date of Test 1-31-71	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 75	Oil - Bbls. 45	Water - Bbls. 30 BLW	Gas - MCF TSTM

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.

Eddie M. Mahfood
(Signature)

Eddie M. Mahfood - Engineer

(Title)

2-1-71

(Date)

OIL CONSERVATION COMMISSION

FEB 3 1971

APPROVED

BY

TITLE OIL AND GAS INSPECTOR

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 multiply tested wells.