

OF COPIES RECEIVED DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65	
HIA FE				RECEIVED	
H.E.				MAR 28 1979	
J.S.G.S.					
LAND OFFICE					
TRANSPORTER		OIL GAS			
OPERATOR					
PRODUCTION OFFICE					
Operator Yates Petroleum Corporation				O. C. C. ARTESIA, OFFICE	
Address 207 South 4th Street - Artesia, NM 88210					
Reason(s) for filing (Check proper box)				Other (Please explain)	
New Well		Change in Transporter of		Form 202	
Recompletion		Oil		Dry Gas	
Change in Ownership		Casinghead Gas		Condensate	
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND LEASE					
Lease Name Jackson AT		Well No. 4		Pool Name, Including Formation Eagle Creek S.A.	
Kind of Lease State, Federal or Fee		Fee		Lease No.	
Location Unit Letter J ; 1650 Feet From The South Line and 1650 Feet From The East					
Line of Section 14 Township 17S Range 25E , NMPL, Eddy County					
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)	
Navajo Crude Oil Purchasing Company				No. Freeman Ave Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas		or Dry Gas		Address (Give address to which approved copy of this form is to be sent)	
Yates Petroleum Corporation				207 So. 4th Street - Artesia, 88210	
If well produces oil or liquids, give location of tanks.		Unit N		Sec. 14	
		Twp. 17S		Rge. 25E	
		Is gas actually connected?		When	
		Yes		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	
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay	
Perforations				Tubing Depth	
				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	
Actual Prod. During Test		Oil - Bbls.		Water - Bbls.	
				Gas - MCF	
GAS WELL					
Actual Prod. Test - MCF/D		Length of Test		Bbls. Condensate/MCF	
Testing Method (pilot, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)	
				Choke Size	
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.					
Christine Tomlinson					
(Signature)					
Christine Tomlinson-Geol. Secty.					
(Title)					
3-28-79					
(Date)					
OIL CONSERVATION COMMISSION					
APPROVED MAR 29 1979					
BY W. A. Gressitt					
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.					