| рранцомтнон зациа FE / / / / / | REQUE | IL CONSTRVATION COMMITTION EST FOR ALLOWABLE AND | Horm C+104 Superpeder Old C+104 and C+11 Effective 1-4-65 | |
|---|-----------------------------------|--|--|--|
| ILAND OF FICE | AUTHORIZATION TO | API: 379 | GAS | |
| OPERATOR / | | 11 S. S. S. S. | | |
| Operation | I | estication (C. C. C | | |
| Yates Petroleum Cor | poration V | | | |
| 207 South 4th Stree Recoon(s) for filing (Check proper box) | t-Artesia, NM 883 | 210 Other (Please explain) | | |
| New Woll | Change in Transporter of: | | | |
| Recompletion Change in Ownership | | andensate | the second | |
| f change of ownership give name ind address of previous owner | | | | |
| DESCRIPTION OF WELL AND I Lease Name Gissler AV | Well No. Pool Name, Includi | reek S. A. State, Fede | | |
| Location T: 165(| Feel From The South | Line and 990 Feet From | m The West | |
| | | | | |
| Line of Section 23 Tow | mahip 175 Range | 25E , NMPM, Ed | dy County | |
| DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Neme of Authorized Transporter of Oil or Condensate Nava jo Crude Oil Purchasing Company Neme of Authorized Transporter of Casinghead Gas K or Dry Gas | | No. Freeman Ave-A | S Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave-Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent) | |
| Yates Petroleum Cor | | | t-Artesia, NM 88210 | |
| If well produces oil or liquids, give location of tenks. | Unit Sec. Twp. Pge F 23 175 25 | | 2-28-73 | |
| (this production is commingled wit COMPLETION DATA | | ool, give commingling order number: | Plug Back Same Hesty, Diff. Resty. | |
| Designate Type of Completio | n = (X) Oil Well Gas We | il New Well Workover Deepen | Plug Back Same Hesty, Diff. Resty, | |
| Dete Spuddod | Date Compl. Ready to Pred. | Total Depth | P.B.T.D. | |
| Elovations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oll/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 FO | | be after recovery of total volume of load o to depth of be for full 24 hours) | il and must be equal to or exceed top allows | |
| Date First New Oil Run To Tanks | Date of Test | Freducing Method (Flow, pump, gas | lijt, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size | |
| Actual Prod. During Tool | Oil-Bbls. | Water-Bbls. | Gas-MCF | |
| | | | C to he he | |
| GAS WELL | Length of Test | Bbla. Condensate/NatCF | Gravity of Condensate | |
| • | Tubing Processo (Shut-in) | Casing Pressure (Shut-in) | Choke Size | |
| Testing Nothed (pilol, back pr.) | . uping Processio (SUAT-IN) | | | |
| DERTIFICATE OF COMPLIANC | 91E | OIL CONSERV | ATION COMMISSION | |
| hereby cortify that the rules and regulations of the Oil Connervation Commission neve 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 12 | |
| LUCKE IN THE SHE COMPLETE TO THE DEBT OF MY MONTON A BUILDENT | | SUPERVISOR | TITLE SUPERVISOR, DISTRICT II | |
| Chustines. | Chustines It mluson | | This form is to be filed in compliance with RULE 1104. If this is a request for allowible for a newly difficient deepened with this form court be accomponied by a two letter of the deviation | |
| Christine Tomlinson | n-Geol. Secty. | All sections of this form r | ordined with NUCL 111. nurt be filled out completely for Allow- | |
| (Tille) 3-30-79 | | A state on nove and the onstated the state of the state o | etto on nove and its ougleted visite. Nut out only for them I it. ill. and VI for through of owner, | |
| (1)** | | well name or number, or transpo | atten or other such theaus of condition. | |

| | -] | | | |
|--|--|--|--|--|
| DISTRIBUTION | NEW MEXICO OIL C | ONSIERVATION COMMISSION | Form C-104 | |
| SANTA FE | REQUEST | FOR ALLOWABLE | Supersedes Old C-104 and C-110 Effective 1-1-65 | |
| FILE | | AND | | |
| U.S.G.S. | AUTHORIZATION TO RA | NSEORT OIL AND NATURAL | GAS | |
| LAND OFFICE | | NSEORT OIL AND NATURAL | | |
| TRANSPORTER GAS | - | EB 2 8 1973 | | |
| OPERATOR PRORATION OFFICE | | and the second state | | |
| Operator | | D. C. C. | | |
| ••••• | m Corporation - ART | ESIA. DFFICE | | |
| Address | Street - Art e sia, <u>NM</u> | 88210 | | |
| Reason(s) for filing (Check proper bo | | Other (Please explain) | | |
| New Well | Change in Transporter of: | | | |
| Recompletion | Oil Dry Ga | 🗂 To Transport | Casinghead Gas | |
| Change in Ownership | Casinghead Gas Conder | | | |
| If change of ownership give name and address of previous owner | | | | |
| - | | | | |
| DESCRIPTION OF WELL ANI | Well No. Pool Name, Including F | | | |
| Gissler AV | 4 Eagle Creek | S.A. State, Feder | al or Fee Pee | |
| | 0 Couth | 990 | m Wast | |
| Unit Letter <u>1</u> , <u>165</u> | O Feet From The South Lin | ne and990Feet From | The West | |
| Line of Section 23 | Fownship 175 Range 2 | 5E , NMPM, Edd | Y County | |
| | | | | |
| DESIGNATION OF TRANSPO | RTER OF OIL AND NATURAL GA | Address (Give address to which appr | oved copy of this form is to be sent) | |
| Scurlock Oil Com | | 1216 Vaughn Bldg | Midland, TX 79701 | |
| Name of Authorized Transcorter of (| Casinghead Gas 🐨 or Dry .Gas | Address (Give address to which appr | oved copy of this form is to be sent) | |
| Phates Pitro | lin (cetporation | and the second | et article, 21711 85210 | |
| If well produces oil or liquids, | Unit Sec. Twp. Ege. F 23 17S 25E | is gas actually connected? W Yes | 2-28-73 | |
| give location of tanks. | | | A-21-12 | |
| If this production is commingled . COMPLETION DATA | with that from any other lease or pool, | | | |
| | Oil Well Gas Well | New Well Workover Deepen | Plug Back. Same Resty. Diff. Resty. | |
| Designate Type of Comple | | | P.B.T.D. | |
| Date Spudded | Date Compl. Ready to Prod. | Tctal Depth | P.B.T.D. 4 | |
| Elevations (DF, RKB, RT, GR, etc. | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | |
| | | | Depth Casing Shoe | |
| Perforations | | | Deptil Casing Shos | |
| | TUBING, CASING, AN | D CEMENTING RECORD | | |
| HOLESIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| | | | | |
| | | | | |
| | | | | |
| | | the recovery of total volume of land a | il and must be equal to or exceed top allow | |
| . TEST DATA AND REQUEST OIL WELL | FOR ALLOWABLE (lest must be able for this d | lepth 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 | |
| Langin of Test | | | | |
| Actual Prod. During Test | Oil-Bbla. | Water-Bbls. | Gas - MCF | |
| | | <u></u> | <u></u> | |
| GAS WELL | | | | |
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate | |
| | | Casing Pressure (Shut-in) | Choke Size | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Crown Lingeria (Duran an) | | |
| . CERTIFICATE OF COMPLI | ANCE | OIL CONSER | VATION COMMISSION | |
| a charmente of comen | | APPROVED MAR 9 | 1973 | |
| I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given | | APPROVED_MAR 9 1973 19 | | |
| Complete house been complie | ed with and that the information given the best of my knowledge and belief. | | WORLN | |
| | | TITLE OIL AND GAS INSP | PECTOR | |
| \circ \circ 1 | 1 1 | | | |
| Etter La La | in like al | To this is a sequent for all | This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened | |
| | Signatures | If this is a request for allowable for a lowly difference of the deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | | |
| Eddie M. Mahfr | | - Li sections of this form | must be filled out completely for allow | |
| (Title) | | All sections of this form must be filled out completely for allow able on new and recompleted wells. | | |
| 2-8-73 | | Till out only Sections I | IT III and VI for changes of owne | |
| (Date) | | well name or number, or transporter, or other such change of conditio Separate Forms C-104 must be filed for each pool in multip | | |

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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