1	SANTA FE /		FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S.	ALITHODIZATION TO TRAN	AND NSPORT OIL AND NATURAL GA	S	
:	LAND OFFICE	RECEI			
i	OIL /	KLDEI			
	RANSPORTER	455			
	OPERATOR 21	APR 2 8 I		,	
1.	PRORATION OFFICE			CAS (NOT BE TO RADIO ENCEPTION TO RADIO EN 24	
	Yates Petroleum Com	poration / O.C.C	3.	T NOT	
	Address	ARTESIA, OF	FIEL	CAS MOST NOT RADIO  EN CEPTION TO RADIO  EN CEPTION TO RADIO	
		eet - Artesia, New M	exico 88210	CAS - LO NO NO	
	Reason(s) for filing (Check proper box)		Other (Please explain)	ER CEPTION	
	New Weii	Change in Transporter of:	CABIRED	EXC	
	Recompletion	Oil Dry Gas	FLATES AND	$\sigma_{\mathcal{G}}$	
	Change in Ownership	Casinghead Gas Condens	sate UNGETAIL	24	
			sate UNILS AIN IS OFF AIN		
	If change of ownership give name and address of previous owner	· ·			
	and indices of provides a more				
H.	DESCRIPTION OF WELL AND L	Well No.   Pool Nam	ne, Including Formation	Kind of Lease	
	Louse Name Federales "BO"	·	ici maria i communi	State, Federal or Fre PEC	
	Location Location				
		Foot From The North Line	and 440 Feet From TI	East	
	Unit Letter A ; 990	Figet From The Lt O.E CIA Dine	g drid		
	Line of Section 22 , Town	ship 17S - Range 2	.5E , NMPM, E	ddy County	
m.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S	folia form in to be conti	
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve		
	Scurlock Oil Compa	ny Tanàna ao amin'ny faritr'i Normana ao amin'ny taona 2008–2014.	414 Mid-America Bldg Address (Give address to which approve	. Midland, Tex.	
	Name of Authorized Transporter of Cast	nghead Gas or Dry Gas	Address (Give maress to some approve	te copy by the form to be as well,	
		Unit Sec. Twp. Rge.	Is gas actually connected? When	2	
	If well produces oil or liquids,	00 1755	No		
	give location of tanks.		<del></del>		
~~ 7	f this production is commingled with that from any other lease or pool, give commingling order number:				
17.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.	
	Designate Type of Completion	$\mathbf{x} = (\mathbf{X})$	X	i !	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	4-3-71	4-20-71	1463'		
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Eagle Creek S.A.	San Andres	1332'	1312 Depth Casing Shoe	
	Perforations 1332,1339,13 1376,1378,1380,138	42,1345,1347,1352,13	358,1363,1365,1367,	1463'	
	13/6,13/8,1380,138			1403	
			DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE 7 20井	1133'	550	
	64"			125	
	0/4	4½" 9.5# ) Tapere	1031')		
		73/6"	1312		
*7	TOTAL AND DECLIEST FO	OR ALLOWARIE (Test must be a	·	and must be equal to or exceed top allow-	
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	Date of Test	Producing Method (Flow, pump, gas lift	i, eic.)	
	4-20-71	4-25-71	Pumping Contra Prossure	Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure	1	
	24	Off-Blys.	Water-Bbls.	Gan - MCF	
	Actual Prod. Ouring Test 70	56	14 BLW	TSTM	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
_			APPROVED	1971	
	I hereby certify that the rules and r	egulations of the Oil Conservation	AFFROVED	, 19	
	Commission have been complied wabove is true and complete to the	ith and that the information given	BY W. C. Dressett		
	,		*** *** *** *** **** ****		
		/	4 6		
				This form is to be filed in compliance with RULE 1104.	
	case M. Vy	1214,44	If this is a request for allow	rable for a newly drilled or deepened nied by a tabulation of the deviation	

Edaie h. hadd	/
(Signature) / Company	
(Title)	
4-27-71	

(Date)

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 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 completed wells.