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DISTRIBUTION			<u> </u>
SANTA FE			
FILE			1
u.s. g.s.		<u></u>	<u> </u>
LAND OFFICE			
TRANSPORTER	OIL		ļ
	GAS		
OPERATOR		i	<u> </u>
		i	1

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

U.S.G.S.	AUTHORIZATION TO TRANSPER LOLL AND NATURAL GAS			
LAND OFFICE OIL				
TRANSPORTER GAS	FEB 2 8 1973			
PRORATION OFFICE				
Operator		O. C. C. ARTESIA, DEFICE	,	
Yates Petroleu	um Corporation ✓	ARTESIA, OFFICE		
Address	Autoria Mil	1 88210		
Reason(s) for filing (Check proper box)	Street - Artesia, NM	Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oll Dry Gas Casinghead Gas Condense	To Transport	Casinghead Gas	
Change in Ownership	Casingheda Gas			
If change of ownership give name and address of previous owner				
. DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	mation Kind of Lease	Lease No.	
Lease Name J Lazy J	3 Eagle Creek		l or Fee Pee	
Location	3 2 32 32 32 32			
	10 Feet From The Lorth Line	and 1650 Feet From	The East	
22	vaship 17S Range	25E , NMPM, Edo	County	
Line of Section 22 Tow	vnship 1/5 Hange			
I. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	Address (Give address to which appro	ved copy of this form is to be sent)	
Name of Authorized Transporter of Oil	or Condensute			
Scurlock Oil Compo	singhead Gas - or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
Transatia Tit	leun Corporation	- 2 - 3 - 5 - 5 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	1. attem, 2m88210	
If well produces oil or liquids,	Unit Sec. Twp. Rge. H 22 17S 25E	Is gas actually connected? Wh	en 2 -28.73	
give location of tanks.	1			
If this production is commingled with COMPLETION DATA	th that from any other lease or pool, g		Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	The second secon	
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Date Spudded				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
Periorations				
		DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEFIN 3E.		
	<u> </u>	i and a series and a series of load of	l and must be equal to or exceed top allou	
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)		
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
		Casing Pressure	Choke Size	
Length of Test	Tubing Pressure			
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Moting From 1991-1991/P		4924 493	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		
	NCE	OIL CONSER!	ATION COMMISSION	
VI. CERTIFICATE OF COMPLIA	NCE			
I hereby certify that the rules and	i regulations of the Oil Conservation	APPROVED 1	973 Tressett	
	with and that the information given he best of my knowledge and belief.	BY_WA	ressess	
SPAIN IN LINE SIZE COMPANY		TITLE OIL AND GAS INSI	PECTOR	
\sim \sim \sim \sim 1		This form is to be filed i	n compliance with RULE 1104.	
Edde he haliped		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 well, this form must be accompanied by a tabulation of the deviation		
Eddie M. Manic	mature) Hagineer	well, this form must be accome	cordance with RULE 111.	
Eddie M. Manio	onu - Engineer	All sections of this form	must be filled out completely for allow	

2-9-73

(Date)

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 completed wells.