

NO. OF COPIES RECEIVED 4
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
REGISTRATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

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

JUN 9 1971

I. **Yates Petroleum Corporation** **D. C. C.**
ARTESIA, OFFICE
207 South 4th Street - Artesia, New Mexico 88210
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Oil ☐ Dry Gas ☐
Extension ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐
Other (Please explain)
**CASINGHEAD GAS NOT BE
FLARED 84-71
UNLESS PERMIT TO R-4070
IS OBTAINED**
If change of ownership give name
and address of previous owner **cf. 2-39
8-11-71**

II. **DESCRIPTION OF WELL AND LEASE**
Lease Name **Eagle Creek BL** Well No. **2** Pool Name, Including Formation **Eagle Creek S.A.** Kind of Lease
State, Federal or Fee **Fee**
East Meridian **N** **330** Feet From The **South** Line and **2310** Feet From The **West**
Line of Section **23** , Township **17S** Range **25E** , NMPM, **Eddy** County

III. **DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**
Name of Authorized Transporter of Oil ☒ or Condensate ☐
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 ☐ or Dry Gas ☐
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. **23** 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) **X** Oil Well **X** Gas Well **X** New Well **X** Workover **X** Deepen **X** Plug Back **X** Same Res'v. **X** Diff. Res'v. **X**
Date Spudded **5-12-71** Date Compl. Ready to Prod. **6-4-71** Total Depth **1472'** P.B.T.D. **1452'**
Pool **Eagle Creek S.A.** Name of Producing Formation **San Andres** Top Oil/Gas Pay **1340** Tubing Depth **1313**
Perforations **1372, 1352, 1348, 1340, 1370 1/2, 1421, 1400 1/2, 1398 1/2, 1396, 1393 1/2, 1391, 1388 1/2, 1385, 1383, 1380 1/2,** Depth Casing Shoe **1318 1452**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
13 3/4" 10 3/4" 32# 201' 50 sxs
9 7/8" 7" 20# 1165' 600 sxs
6 1/8" 4 1/2" 9.5#) Tapered 522') 1452' 125 sxs
5 1/2" 15.5#) 911')

V. **TEST DATA AND REQUEST FOR ALLOWABLE** (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)
Oil Well
Date First New Oil Run To Tanks **6-4-71** Date of Test **6-6-71** Producing Method (Flow, pump, gas lift, etc.) **Pumping**
Length of Test **24** Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test **30** Oil-Bbls. **15** Water-Bbls. **15 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 Casing Pressure 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 (Title)
6-9-71 (Date)
OIL CONSERVATION COMMISSION
APPROVED **JUN 11 1971**, 19
BY **W. A. Gressett**
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 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.