-	SET OF THE RECEIVED 1				
	DIST KIBUTION		CONSERVATION COMMISSION	Form C=194 8	
	SANTA FE	REQUEST	FOR ALLOWABLE AND	Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.3. LANC OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GA	S	
	OIL DIL DIL	RFM	ter e se se s		
	GAS	17. Lu,	EIVED		
I	PRORATION OFFICE	JUN J	1971		
	Yates Petroleum Corporation D. C. S.   207 South 4th Street- Artesia Asies Mexico D. C. S.   Reason(s) for filing (Check proper box) Other (Please experiate)   Not BE Other (Please experiate)   Not BE Change in Transporter of:   Not BE CASIN(11)   CASIN(11) CASIN(11)   Not BE CASIN(11)				
i	207 South 4th St:	reet-Artesia Asiewa	Mexico CA	S DIUST NOI	
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please experial)	S MUSI (-71	
	New Well	Cil Dry G	as FLARED IN EX	17. 2-471	
l	Nemberti, - wienticit)	Casinghead Gas Conde	IS OPT AINT	9	
	If change of ownership give name and address of previous owner				
H.	ESCRIPTION OF WELL AND LEASE				
1	Lease Date Ingram Jackson BV		dine, merdanių i etilietien	Kind of Lease State, Federal or Fee Pee	
i	Lecation			Foct	
	Unit Letter $\underline{B}$ ; <u>990</u>		ine and Feet From Tr		
	Line of Section 27 , Town	nship 17S Range 25	5E , NMPM, Eddy	County	
ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL G	AS	Jerry of this form is to be tend	
	Courlock Oil Consany		Address (Give address to which approved copy of this form is to be sent) 414 Mid-America Bldg., Midland, Texas		
	Lone of Authorized Transporter of Cast	Inghead Gas or Dry Gas	Address (Give address to which approve	dress (Give address to which approved copy of this form is to be sent)	
	If well produces oil or liquids,	Unit Sec. Twp. Rge. D 26 175 252	Is gas actually connected? When NO	1	
	give location of tanks. D 26 175 252 NO If this production is commingled with that from any other lease or pool, give commingling order number:				
	COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.				
	Designate Type of Completion	n - (X) X Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
	Date Spudded 5-24-71	6-11-71	1465'	1452	
	Pool Eagle Creek S.A.	Name of Producing Formation San Andres	Top Oil/Gas Pay 1307	Tubing Depth 1285	
	$\begin{array}{c} 133910 \\ \hline \\ \hline \\ 1350 \\ 13302 \\ \hline \\ 1302 \\ \hline \\ 1302 \\ \hline \\ 1307 \\ 1425 \\ \hline \\ 1425 \\ \hline \\ 1307 \\ \hline \\ 1425 \\ \hline 1425 \\ \hline \\ 1425 \\ \hline 1$	2, 1403, 1396, 1385, 1385, 1433, 1332, 1347,	1376,1367 <sup>1</sup> 2,1355 <sup>1</sup> 2, 1369 <sup>1</sup> 2,1373,1379 <sup>1</sup> 2,1406 <sup>1</sup>	Depth Casing Shoe 1452	
			ND CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	<u>DEPTH SET</u> 250'	SACKS CEMENT	
	9 773"	7" 26#	1166	350 sxs	
	6 1/8"	4½" 9.5#) Tapered 5½" 14# )	470')1465' <i>DF</i> 978'	125 sxs	
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 allow-				
				Producing Method (Flow, pump, gas lift, etc.)	
	6-11-71 Length of Test	6-13-71 Tubing Pressure	Pumping Casing Pressure	Choke Size	
	24	Oil-Bbls.	Water-Bbls.	Gas-MCF	
	Actual Prod. During Test 53	38	15 BLW	TSTM	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Tenting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI	1. CERTIFICATE OF COMPLIANCE		المعادية والمعالية المستحد الم	OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation		on APPROVED	APPROVED	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY_ W. a. Snessett		
	'n		TITLE GAS INSTER		
	Ch 1 1 1 1		This form is to be filed in compliance with RULE 1104.		
	Ender Wichithing		walt this form must be accompa	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.	
	the second s	Engineer'	All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
	6-16-7	1	Fill out Sections I. H. III.	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.	
	(1)ate)		Separate Forms C-104 mus	Separate Forms C-104 must be filed for each pool in multiply	
			ij compteten wetts.	completed wells.	