

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-101 Superseding Old C-101 and C-11 Effective 1-1-65	
SALE PRICE		REQUEST FOR ALLOWABLE			
FILE		AND			
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
TRANSPORTER		RECEIVED			
OIL					
GAS					
OPERATOR		MAR 29 1979			
PRODUCTION OFFICE					
Operator Yates Petroleum Corporation ✓					
Address 207 South 4th Street-Artesia, NM 88210					
Reason(s) for filing (Check proper box)					
New Well		Change in Transporter of:		Other (Please explain)	
Recompletion		Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>		From Sec	
Change in Ownership		Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>			
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND LEASE					
Lease Name		Well No.		Kind of Lease	
Jackson Estate BY		2		State, Federal or Fee Fee	
Location		Pool Name, including Formation		Lease No.	
Unit Letter F		Eagle Creek S. A.			
; 2310		Feet From The North Line and		2310 Feet From The West	
Line of Section 22		Township 17S		Range 25E, NMPL, Eddy County	
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Navajo Crude Oil Purchasing Company		No. Freeman Ave-Artesia, NM 88210			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Yates Petroleum Corporation		207 South 4th Street-Artesia, NM 88210			
If well produces oil or liquids, give location of tanks.		Unit		Is gas actually connected? When	
K		22		yes 2-28-73	
Twp.		Rgo.			
17S		25E			
If this production is commingled with that from any other lease or pool, give commingling order number:					
COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well		Gas Well	
New Well		Workover		Deepen	
Plug Back		Same Res'v.		Diff. Res'v.	
Date Spudded		Date Compl. Ready to Prod.		Total Depth	
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay	
Perforations		Tubing Depth		Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET	
SACKS CEMENT					
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, etc.)	
Length of Test		Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.	
				Gas-MCF	
GAS WELL					
Actual Prod. Test-MCF/D		Length of Test		Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)		Tubing Pressure (shut-in)		Casing Pressure (shut-in)	
				Choke Size	
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.					
OIL CONSERVATION COMMISSION					
APPROVED MAR 29 1979					
BY W. A. Gussert					
TITLE SUPERVISOR, DISTRICT II					
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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.					