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LAND OFFICE	
TRANSPORTER	OIL / GAS /
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Superseding Old C-104 and C-11
Effective 1-1-65

MAR 7 1977

Operator Yates Petroleum Corporation		O.C.C. ARTESIA, OFFICE	
Address 207 South 4th Street - Artesia, NM 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Recompletion <input type="checkbox"/>			
Change in Ownership <input type="checkbox"/>			

If change of ownership give name and address of previous owner

R-5460 7-1-77

II. DESCRIPTION OF WELL AND LEASE			
Lease Name State "CY"	Well No. 1	Pool Name, Including Formation Waldcat - Atoka-Strawn	Kind of Lease State, Federal or Fee State
Lease No. K-6701			
Location Unit Letter "K" : 1980 Feet From The South Line and 1980 Feet From The West			
Line of Section 32 Township 17S Range 25E, NMPM, Eddy County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Company		Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave-Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Company		Address (Give address to which approved copy of this form is to be sent) P. O. Box 2521 - Houston, TX 77001	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 32	Twp. 17S
		Pge. 25E	Is gas actually connected? Yes
			When 3-5-77

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)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>
			Workover <input type="checkbox"/>
			Deepen <input type="checkbox"/>
			Plug Back <input type="checkbox"/>
			Same Resv. <input type="checkbox"/>
			Diff. Resv. <input type="checkbox"/>
Date Spudded 11-26-73	Date Compl. Ready to Prod. 12-18-73	Total Depth 8330'	P.B.T.D. 8216'
Elevations (DF, RKB, RT, GR, etc.) 3603'GR, 3621'KB	Name of Producing Formation Atoka-Strawn	Top Oil/Gas Pay 7782'	Tubing Depth 7725'
Perforations 7782-8066'			Depth Casing Shoe 8216'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13-3/8"	206'	125
12 1/4"	8-5/8"	1066'	675
7-7/8"	4 1/2"	8216'	525
	2-3/8"	7725'	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lost 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	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2350	24	6.24	56.0
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1911	Casing Pressure (shut-in) -	Choke Size 3/4"

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.

Christine Tomlinson
(Signature)

Christine Tomlinson - Geol. Secty
(Title)

3-3-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 6 1977
BY *W.A. Gressett*
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 re-completed wells.

Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.

Subject to Case 5910 4-26-77