

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		REQUEST FOR ALLOWABLE		AND		OIL AND NATURAL GAS		Form C-101 Superseding Old C-101 and C-11 Effective 1-1-65	
SANTA FE		U.S.G.S.		LAND OFFICE		TRANSPORTER		OIL		GAS	
OPERATOR		PRODUCTION OFFICE		APR - 2 1979		C.C.C.		ARTESIA OFFICE			
Operator Yates Petroleum Corporation											
Address 207 South 4th Street-Artesia, NM 88210											
Reason(s) for filing (Check proper box)											
New Well <input type="checkbox"/> Change in Transporter of <input type="checkbox"/>											
Recompletion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>											
Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>											
Other (Please explain) From Well											
If change of ownership give name and address of previous owner											
DESCRIPTION OF WELL AND LEASE											
Lease Name		Well No.		Pool Name, including Formation		Kind of Lease		Lease No.			
Gissler AV		9		Eagle Creek S. A.		State, Federal or Fee		Fee			
Location											
Unit Letter C ; 330 Feet From The North Line and 1650 Feet From The West											
Line of Section 23 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 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 So. 4th Street-Artesia, NM 88210							
If well produces oil or liquids, give location of tanks.				Unit		Sec.		Twp.		Rge.	
				F		23		17S		25E	
				Is gas actually connected?		When					
				Yes		5-20-74					
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		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth					
Perforations						Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD											
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT					
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)											
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					
Testing Method (pilot, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size					
CERTIFICATE OF COMPLIANCE											
OIL CONSERVATION COMMISSION											
APPROVED APR 4 - 1979											
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 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.											

Christine Tomlinson

(Signature)

Christine Tomlinson-Geol. Secty.

(Title)

3-30-79

(Date)