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1	SANTA FE			
	FILE			-
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	LAND OFFICE			1
	TRANSPORTER	OIL		
		GAS	1	
	OPERATOR		\Box	
1.	PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWARIE

Form C-104 Supersedes Old C-104 and C-110

SANIAFE	- KEQUESI	FOR ALLOWABLE	Effective 1-1-65			
FILE	- AUTUODIZATION TO TRA	AND	CAS			
U.S.G.S.	- AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	·			
OIL I	1					
TRANSPORTER GAS I	1	RECEIVED				
OPERATOR /						
I. PRORATION OFFICE		OCT 2 3 19	974			
Operator Vates Petrole	um Corporation	221 22 2	• •			
Address	dir corporation	O. C. C				
	Street - Artesia, NM	88210 ARTESIA, OF	•			
Reason(s) for filing (Check proper bo	screet - Artesia, NM	Other (Please explain)				
New Well	Change in Transporter of:					
Recompletion	Oil Dry Ga	ıs 🔲				
Change in Ownership	Casinghead Gas Conder	nsate []				
If change of ownership give name	•					
and address of previous owner						
	TEACE					
II. DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation Kind of Lea	se NM 036191 Lease No.			
Federales BO	6 Eagle Creek	K San Andres State, Feder	ral or Fee Fed.			
Location						
Unit Letter A 99	O Feet From The North Lin	ne and 990 Feet From	The East			
	170	757 ·	Typ County			
Line of Section 22 To	ownship 17S Range 2	25E , NMPM, Edo	<u>County</u>			
	TER OF OH AND NATURAL G	15	•			
Name of Authorized Transporter of O	RTER OF OIL AND NATURAL GA	Address (Give address to which appr	oved copy of this form is to be sent)			
Scurlock Oil C		1216 Vaughn Bldg-M	idland, TX 79701			
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)			
Yates Petroleu	m Corporation	207 So. 4th Street				
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	^{/hen} 10-16-74			
give location of tanks.	D 22 178 25E	yes	10-10-74			
If this production is commingled w	with that from any other lease or pool,	give commingling order number:				
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v			
Designate Type of Complet		x				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
9-18-74	10-16-74	1485'				
Elevations (DF, RKB, RT, GR, etc.)		Top Oil/Gas Pay	Tubing Depth			
3524' GR	San Andres	1280'	1421' Depth Casing Shoe			
Perforations	00 14501		1485 °			
12	80-1452'	D CEVENTING DECORD	1405			
	CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT			
14-3/4"	10-3/4"	253'	135 sacks			
95"	7"	1168'	775 sacks			
6½"	45&55" (Tapered)	1485'	125 sacks			
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load o	il and must be equal to or exceed top allow			
OIL WELL	Bute joi titta s	lepth or be for full 24 hours) Producing Method (Flow, pump, gas	lift. etc.)			
Date First New Oil Run To Tanks	Date of Test	Pumping				
10-16-74 Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
24						
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF			
51.5	38.5	13 BLW	28.6			
	•					
GAS WELL		1511 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Gravity of Condensate			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity or contambate			
Testing Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
lesting Method (phot, back pr.)						
W CORTEGATE OF COURT IA	CERTIFICATE OF COMPLIANCE		VATION COMMISSION			
VI. CERTIFICATE OF COMPLIA	1102	OCT 2.3 1	APPROVED OCT 2 3 1974			
I hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED UUI ~ 0 1				
O	i with and that the information given the best of my knowledge and belief.	BY_W.U. Desset				
above is true and complete to	the post of my knowledge and perior					
0,1		TITLEOIL AND GAS INSI				
(-100		This form is to be filed i	n compliance with RULE 1104.			

Edie h. halif .	
(Signature)	
Eddie M. Mahfood - Engineer	

10-22-74

(Date)

(Title)

If this is a request for allowable for a newly drilled or despened 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.