

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-1
Effective 1-1-65

RECEIVED
FEB 23 1978

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 ☒	Change in Transporter of ☐		
Recompletion ☐	Oil ☐ Dry Gas ☐		
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐		

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name City of Artesia "EQ"	Well No. 1	Pool Name, including Formation Eagle Creek Permo-Penn Gas	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter J ; 1650 Feet From The South Line and 1980 Feet From The East Line of Section 24 Township 17S Range 25E , NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ 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 ☐ or Dry Gas ☒ 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 J Sec. 24 Twp. 17S Rge. 25E	Is gas actually connected? Yes When _____

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 ☐	Stim Res'tv. ☐	Diff. Res'tv. ☐
Date Spudded 8-16-75	Date Compl. Ready to Prod. 11-30-75		Total Depth 8406		P.B.T.D. 6800			
Elevations (DF, RKB, RT, CR, etc.) 3450	Name of Producing Formation Penn		Top Oil/Gas Pay 6530		Tubing Depth 6472			
Perforations 6530-6600					Depth Casing Shoe 8277			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13-3/8"	369	250
12 1/4"	8-5/8"	1262'	1325
7 7/8"	4 1/2"	8277	545
	2-3/8"	6472	

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)

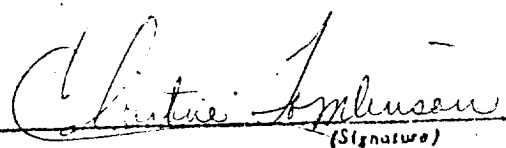
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 490	Length of Test 24	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1770	Casing Pressure (shut-in) pkc	Choke Size 1/2"

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-Geol. Secty
(Title)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____

TITLE _____

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 deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ownership, name or number for testing, etc. or other such change of condition.