

| | | |
|------------------|-------|----|
| DISTRIBUTION | | 3 |
| SA | TA | FE |
| FI | E | |
| G.S. | | |
| ID | OFFIC | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

| | | |
|---|---|-------------------------------------|
| Operator Yates Petroleum Corporation ✓ | | NOV 5 1975 |
| Address 207 South 4th Street - Artesia, NM 88210 | | O. C. C. ARTESIA, OFFICE |
| Reason(s) for filing (Check proper box) | | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: | Other (Please explain) |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> | Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> |

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------|--|--|-----------|
| Lease Name J Lazy J | Well No. 12 | Pool Name, Including Formation Eagle Creek S.A. | Kind of Lease State, Federal or Fee | Lease No. |
| Location Unit Letter <u>H</u> ; <u>2310</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> | | | | |
| Line of Section <u>22</u> Township <u>17S</u> Range <u>25E</u> , NMPM, <u>Eddy</u> County | | | | |

III. 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) |
| Scurlock Oil Company | 1216 Baughn Building-Midland, TX 79701 |
| 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 Sec. Twp. Rge. Is gas actually connected? When |
| H 22 17 25 | Yes 10-29-75 |

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 checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Restv. | Diff. Restv. |
| Date Spudded 10-12-75 | Date Compl. Ready to Prod. 10-29-75 | Total Depth 1500' | P.B.T.D. 1495' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3523' | Name of Producing Formation San Andres | Top Oil/Gas Pay 1360 | Tubing Depth 1346 | | | | | |
| Perforations 1360-1436' San Andres | | | Depth Casing Shoe 1495' | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 14-3/4" | 10-3/4" | 318' | 250 | | | | | |
| 9 1/2" | 7" | 1175' | 820 | | | | | |
| 6 1/4" | 4 1/2" & 5 1/2" (Tapered) | 1495' | 150 | | | | | |
| | 2-3/8" | 1346' | | | | | | |

V. 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 10-29-75 | Date of Test 10-31-75 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 | Tubing Pressure 40 | Casing Pressure - | Choke Size - |
| Actual Prod. During Test 57.7 | Oil - Bbls. 46.1 | Water - Bbls. 11.6 BLW | Gas - MCF 34.2 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

I. 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.

Eddie M. Mahfood

(Signature)

Eddie M. Mahfood-Engineer

(Title)

11-4-75

(Date)

OIL CONSERVATION COMMISSION

NOV 5 1975

APPROVED _____, 19____

BY W. A. Gressett

SUPERVISOR, DISTRICT II

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 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.