

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

RECEIVED

JUL 7 1976

TRANSPORTER		OIL	
		GAS	
OPERATOR			
PRORATION OFFICE			
Operator Yates Petroleum Corporation			
Address		O. C. C. ARTESIA, OFFICE	
207 South 4th Street - Artesia, NM 88210			
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	Request permit to
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	sell 170 bbls of crude produced
		Dry Gas	on a 120 day test.
		Condensate	
If change of ownership give name and address of previous owner			

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Norris "FK"	1	Eagle Creek (S.A.)	State, Federal or Fee	Fee
Location				
Unit Letter	N	330	Feet From The	South Line and
				2310
				Feet From The
				West
Line of Section	12	Township	17S	Range
				25E
				NMPM,
				Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/>	or Condensate		Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.				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)
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	N	12	17S	25E
				No
				When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
1-19-76	2-1-76	1580'	1566'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3454' GR	San Andres	1367'	1347'					
Perforations			Depth Casing Shoe					
		1367-1509'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
15"	10-3/4"	330'	200					
9 1/2"	7"	1212'	500					
6 1/4"	4 1/2 & 5 1/2"	1566'	150					

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)

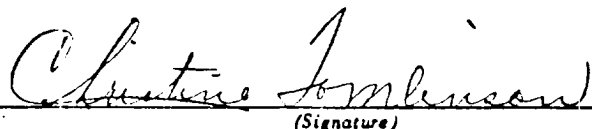
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-1-76	6-1-76	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
120 days			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
2670 bbls	70	2600	Trace

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

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-Geol. Secty

(Title)

7-6-76

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 7 1976, 19

BY

TITLE OIL AND GAS INSPECTOR

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.