

DISTRIBUTION		3	
SANTA FE		/	
FILE		/	✓
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	/	
	GAS	/	
OPERATOR		/	
PRODUCTION OFFICE			

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

Form C-104  
Supersedes Old C-104 and C-114  
Effective 1-1-65

AUG 25 1976

O. C. C.

ARTESIA, NEW MEXICO

Operator Yates Petroleum Corporation ✓	
Address 207 South 4th Street - Artesia, NM 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
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 Federal "BZ"	Well No. 14	Pool Name, including Formation Eagle Creek S.A.	Kind of Lease NM 0219603 State, Federal or Fee Fed.	Lease No.
Location Unit Letter <u>B</u> ; <u>330</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line of Section <u>28</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"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) No. Freeman - Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 207 South 4th Street-Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 28	Twp. 17S	Rge. 25E	Is gas actually connected? Yes	When 8-12-76

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

V. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-30-76	Date Compl. Ready to Prod. 8-12-76		Total Depth 1482'		P.B.T.D. 1469'			
Elevations (DF, RKB, RT, GR, etc.) 3563' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 1298'		Tubing Depth 1281'			
Perforations 1298-1463'					Depth Casing Shoe 1469'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4"		294'		150			
9-7/8"	7"		1136'		500			
6 1/4"	4 1/2 & 5 1/2"		1469'		150			
	2-3/8"		1281'					

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 8-12-76	Date of Test 8-16-76	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 20#	Casing Pressure -	Choke Size -
Actual Prod. During Test 32.1	Oil - Bbls. 18.1	Water - Bbls. 14.0 BLW	Gas - MCF 16.2

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

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  
(Signature)  
Christine Tomlinson - Geol. Secty  
(Title)  
8-24-76  
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 25 1976, 19\_\_\_\_  
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.