HO. OF COPIED BECKIVED							
	2,	-		CONSERVATION COM	A. TSION	fbrm C-104	
DISTRIBUTION							Old C-104 and C-11
SANTA FE		REQUEST FOR ALLOWABLE				Effective 1-	
FILE				· AND	NIATUDAL C	· A C	
U.S.G.S.		AUTHO	ORIZATION TO TRA	M21,OK LOIT WHE	NATURAL C	JAS .	
LAND OFFICE					-	D = = -	
TRANSPORTER GAS	H					RECEIV	VED
OPERATOR	4					SEP - 7 19	376
PRORATION OFFICE							
Yates Petrole	um Cc	rporati	on 🗸	•			
Address						ARTESIA, OFF	ICE
207 South 4th	Stre	et - Ar	tesia. NM 8	8210			
			000207 100		se explain)		
Reason(s) for filing (Check pro	per our	~h 1-	n Transporter of:				
New Well A			Dry Go	., [
Recompletion		OII	=	771			
Change in Ownership		Casinghe	ad Cas Conde			 	
If change of ownership give and address of previous own	name ier						
DESCRIPTION OF WELL	AND I	FASE					
DESCRIPTION OF WELL	. A.V.D. L	Well No.	Pool Name, Including F	ormation	Kind of Leas		Lease No.
Morris Estate	ייככי	' 4	Eagle Cree	k S.A.	State, Federa	der Fee Fee	
			1	•			
Location		_	Cauth	ne and 990	Feet Stom	The West	
Unit Letter L	1650	Feet Fro	om The South Li	ne and			
		_		25E , NM	PM, Ede	Av.	County
Line of Section 14	Tow	mship _	L7S Range	25E , NM	1100	<u> </u>	
			HADVDAY O	4.0			
DESIGNATION OF TRAN	SPORT	ER OF OIL	, AND NATURAL G	Address (Give addres	ss to which appro	oved copy of this form	is to be sent)
Name of Authorized Transport			Condensate			Midland, TX	
Scurlock Oil	Compa	any		Address (Give address	ss to which appro	oved copy of this form	is to be sent)
Name of Authorized Transport	er of Cas	inghead Gas 🖔	ot Dry Gas	<u>,</u>			
Yates Petrole	ium Co	orporati	ion	207 South	4th Str	<u>eet - Artes</u>	<u>1a, NM 882</u>
If well produces oil or liquide		Unit Sec	c. twp.	Is gas actually conn	ected? ""		
give location of tanks.		M .	14 175 25E	Yes		8-26-76	
If this production is commit		h that from a	ny other lease or pool	give commingling or	der number:	_	
If this production is commit	'Sted Att	n that from a	ily other toner is a			Tai Nat Isaa	Restv. Diff. Restv
COMPLETION DATA			Oli Well Gas Well	New Well Workov	er Deepen	Plug Back Same	Mes.v. Din Nes v
Designate Type of Co	mpletio	n = (X)	X	X	1		
Date Spudded			Ready to Prod.	Total Depth		P.B.T.D.	
1		ł .	6-76	1499'		1455'	
8-13-76			ducing Formation	Top Oil/Gas Pay		Tubing Depth	
Elevations (DF, RKB, RT, G)	₹, etc.j	ł		1311'		1333'	
3496' GR		San	Andres			Depth Casing Shoe	,
Perforations		1455'					
		131.	1-1431'	IS ACTURNATIVE DEC	000		
			TUBING, CASING, AN			SACKS	CEMENT
HOLE SIZE			DEPTH SET		200		
15"	10-3/4"		356'				
9-7/8"		7"		1154		700	
61/4"		43853"		1455!		 	
04		2-3/	ล้"	1333'			
	,500 F		ATST TO CT and must be	after recovery of total s	column of load oi	l and must be equal to	o or exceed top allo
TEST DATA AND REQU	JESI F	UK ALLUM	able for this	depth or be for full 24 h	ours)		
OIL WEIL Date First New Oil Run To T	`onk •	Date of Test	<u> </u>	Preducing Method (i	low, pump, gas	lift, etc.)	
		4	0-76	Pum	ping		
8-26-76		Tubing Pres		Casing Pressure		Choke Size	· ~.
Length of Test		1				1 _ \	
24		20	<u>#</u>	Water - Bble.		Gas-MCF	
Actual Prod. During Test		Oil-Bbla.				1 22 1	\Diamond

GAS WELL

Length of Test			Bbls. Condensate/MMCF	Charles of Courses /		
ĺ	Actual Frod. Test-MCF/D	Caudin of 1 and		· (\alpha'		
ł	•		Casing Pressure (Shut-in)	Choke Size		
Ì	Testing Method (pitot, back pr.)	Tubing Pressure (Shug-111)	Carry Figure Carry			
l						
			OU CONSERVATION COMMISSION			

A. CERTIFICATE OF COMPLIANCE

1.

Ħ.

II.

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.

\sim 1	1	`	
Questine	Limb	maa	
Allanin	(Stanuture)		
	1 +	Cool	Spots

Christine Tomlinso (l'ile)

(Date)

This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly dill: i or depended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE. 111.

All sections of this form muct be filled out completely for allowable on now and recompleted yields. FIII out only Sections I. U. III, and VI for change of condition well name or number, or transporter, or other such change of condition

TITLESUPERVISOR, DISTRICT II