

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78

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SANTA FE	
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U.S.U.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ARTESIA OFFICE

Yates Petroleum Corporation

Address
207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Johnson FE	Well No. 3	Pool Name, Including Formation Eagle Creek SA	Kind of Lease State, Federal or Fee Fee	Lease
Location Unit Letter A ; 330 Feet From The North Line and 330 Feet From The East Line of Section 23 Township 17S Range 25E, NMPM, Eddy				

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) Box 159, 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 So. 4th, Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 23	Twp. 17S	Rge. 25E	Is gas actually connected? Yes	When 9-25-81

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff.
Date Spudded 8-26-81	Date Compl. Ready to Prod. 9-23-81		Total Depth 1500'		P.B.T.D. 1495'			
Elevations (DF, RKB, RT, GR, etc.) 3470' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 1309'		Tubing Depth 1295'			
Perforations 1309-1473'					Depth Casing Shoe 1495'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10-3/4"	295'	300
9-1/2"	7"	1220'	1075
6-1/2"	4-1/2"	1495'	175

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 testable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 9-23-81	Date of Test 9-25-81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 18#	Casing Pressure 18#	Choke Size Open
Actual Prod. During Test 39	Oil-Bble. 28	Water-Bble. 11	Gas-MCF 22

Posted ID-2
& Comp. Book
NCO/YPC
10-2-81

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)
Engineering Secretary

9-29-81

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 2 1981

BY W. A. Gussert
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 depth 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 well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multicompleted wells.