

MAR 08 '89

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTO. C. D.
ARTESIA, OFFICEForm C-104
Revised 10-01-78
Formal 08-01-83
Page 1OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

WELL NUMBER	
DATE OF OPERATION	
WELL NAME	
WELL TYPE	
WELL DEPTH	
WELL LOCATION	
TRANSPORTER	
OPERATION	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Harvey E. Yates Company ✓		
Address P.O. Box 1933, Roswell, New Mexico 88202		
☐ New Well ☐ Reoperation ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ casinghead Gas ☒ Dry Gas ☐ Condensate	Other (Please explain) CORRECTION IN TRANSPORTER

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Empire South Deep Unit	Well No. 13	Pool Name, including Formation South Empire Morrow	Kind of Lease State, Federal or Fee State	Lease No. B-7596
Location Unit Corner <u>N</u> : <u>1432</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>South</u> Line of Section <u>30</u> Township <u>17S</u> Range <u>29E</u> , N.M.P.M., <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Amoco Trucks (Western) TRANSPORT CO. AGENT Box 1183 Houston TX 77001	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 336 HS&L Bldg, Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks. Unit : <u>N</u> : <u>30</u> : <u>17S</u> : <u>29E</u>	Is gas actually connected? <u>Yes</u> When <u>12/19/88</u>

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

NOTE. Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Production Analyst
3/2/89
(Date)

OIL CONSERVATION DIVISION

MAR 13 1989

APPROVED _____
BY _____ Original Signed By _____
TITLE _____ Mike Williams

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.

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