

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRORATION OFFICE	

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

Form C-104
Supersedes Old C-101 and C-11
Effective 1-1-65

JUN 16 1977

Operator Yates Petroleum Corporation		O. C. C. ARTESIA, OFFICE	
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: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Recompletion <input type="checkbox"/>			
Change in Ownership <input type="checkbox"/>			

If change of ownership give name and address of previous owner R-5609 7-1-78

DESCRIPTION OF WELL AND LEASE			
Lease Name Mallard "HM"	Well No. 1	Pool Name, Including Formation Undesignated Yeso	Kind of Lease State, Federal or Fee Fee
Location Unit Letter L : 1650 Feet From The South Line and 990 Feet From The West Line of Section 28 Township 18S Range 26E , NMPM, Eddy County			

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 Company		Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave-Artesia, NM	
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	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 28	Is gas actually connected? Yes
	Twp. 18S	Range 26E	When 5-20-77

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 Old Hole 4-28-77	Date Compl. Ready to Prod. 5-20-77	Total Depth 9315 COTD 3000'	P.B.T.D. 2910'
Elevations (DF, RKB, RT, GR, etc.) 3413' GR	Name of Producing Formation Yeso	Top Oil/Gas Pay 2541'	Tubing Depth 2524'
Perforations 2541-2696 1/2'			Depth Casing Shoe 2910'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8-5/8"	1271'	400 sacks
7-7/8"	5 1/2"	2910'	500 sacks

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL	
Date First New Oil Run To Tanks 5-20-77	Date of Test 6-14-77
Length of Test 24 hours	Producing Method (Flow, pump, gas lift, etc.) Pumping
Actual Prod. During Test 139	Tubing Pressure 25
	Casing Pressure 20
	Water-Bbls. 118
	Choke Size 2"
	Gas-MCF 19

GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
Testing Method (pilot back pr.)	Tubing Pressure (Shut-in)
	Bbls. Condensate/MCF
	Gravity of Condensate
	Casing Pressure (Shut-in)
	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED <u>JUN 17 1977</u> , 19	
<u>Christine Tomlinson</u> (Signature) Christine Tomlinson-Geol. Secty (Title) 6-15-77 (Date)		BY <u>W.A. Gressett</u> TITLE <u>SUPERVISOR, DISTRICT H</u>	
		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 deviated 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 re-completed wells. Fill out only Sections I, II, III, and VI for changes of name, well name or number, or transporter, or other such change of condition.	