	SA TA FE / FI E /	L CONSERVATIO	/ABL	Form C -104 Supersedes Old C-104 and C-1 Effective 1-1-65													
	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS																
•	OPERATOR /				RECEIVED												
1.	Operator OCT 3 1977																
	Yates Petroleum Corporation V																
	207 S. 4th Street, Artesia, New MexicorEs882101DE Reoson(s) for filing (Check proper box) New Well Other (Please explain)																
	Recompletion Change in Ownership X	Change in Oil Casinghea		Gas	Shut-in												
	If change of ownership give name and address of previous owner	Depco, In	nc 800 C	entral, Od	essa, Te	kas 797	61										
	DESCRIPTION OF WELL AND LEASE																
V			Artesia Q		Kind of State, F	Lease oderal or Fee	State	Lease No. 647									
	Unit Letter 0; 990 Feet From The South Line and 2310 Feet From The East																
	Line of Section 15 T	ownship 18s	Range	28	, NMPM,	Eddy		County									
II.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oll or Condensate Address (Give address to which approved copy of this form is to be sent) Navaio Refining Co. Dimensional States (Give address to which approved copy of this form is to be sent)																
	Navajo Refining CoPipeline Division			North Freeman, Artesia Address (Give address to which approved copy of this form is to be sent)													
	Phillips Petroleu	Unit Sec.	Twp. Rge.	Udessa /	Texas	When											
	give location of tarks. If this production is commingled w	H 15															
v . آ	f this production is commingled with that from any other lease or pool, give commingling order number:																
	Designate Type of Completi	ion - (X)	1	· · · · · · · · · · · · · · · · · · ·	kover Deeper	n 'Plug Bac 	k Strae Res*	v. Diff. Res'v.									
	Date Spudded	Date Compl. Rec	ady to Prod.	Total Depth		P.B.T.D.	·····1	-1									
	Elevations (DF, RKB, RT, GR, etc.; Name of Producing Formation			Top Cil/Gas Pay Tubing			epth										
	Perforations	-4			• • • • • • • • • • • • • • • • • • •	Depth Ca	sing Shoe										
F				D CEMENTING RECORD													
ł	HOLE SIZE	CASING &	TUBING SIZE	DEI	TH SET	4	SACKS CEME	TNT									
┝	····																
Ē																	
(TEST DATA AND REQUEST F	OR ALLOWABL	E (Test must be able for this d	after recovery of tot epth or be for full 2	al volume of load 4 hours)	oil and must be	equal to or exc	ceed top allow-									
	Date First New Oil Run To Tanks	Date of Test		Producing Metho	(Flow, pump, ga	s lift, etc.)											
	Longth of Test	Tubing Pressure	·	Casing Pressure		Choke Siz	• 0										
-	Actual Prod. During Test	Oil-Bhis.		Water-Bbis.	· · · ·	Gas - MCF											
_	GAS WELL Actual Prod. Tost-MCF/D			· ·	· · · · · · · · · · · · · · · · · · ·	I	N I	ان در									
	Actual Proa. 1681-MCF/D	Length of Test		Bbis. Condensate	/MMCF	Gravity of	Condensate										
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure	Shut-in)	Choke Size	3										
	ERTIFICATE OF COMPLIANC				DIL CONSER		MMISSION	J									
- C	hereby certify that the rules and r ommission have been complied w pove is true and complete to the	APPROVED															
	ove is the and complete to the	BY															
	Chm Millor	This form is to be filed in compliance with RULE 1104.															
(S/stature) Production Superintendent (Title) September 29, 1977 (Date)				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 allow- able 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.													
										Inat	••		Well name or n	anoer, or transp	urtan or other s	uch Change o	a condition.
										•							