

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

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

RECEIVED

MAR 27 1980

SA TAFE	1	
FILE	1	
G.S.		
LOCAL OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR	1	
PRORATION OFFICE		

Operator	Yates Drilling Company	O. C. D.
Address	207 S. 4th, Artesia, NM 88210	ARTESIA, OFFICE
Reason(s) for filing (Check proper box)		
New Well	<input checked="" type="checkbox"/> Re-entry	Change in Transporter of:
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Artesia Metex Unit	Well No.	10	Pool Name, including Formation	Artesia Qn. Grbg. SA	Kind of Lease	State, Federal or Fee	State	Lease No.	B-11595
Location										
Unit Letter	L	2310	Feet From The	South	Line and	330	Feet From The	West		
Line of Section	19	Township	18S	Range	28E	NMPM,	Eddy	County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Navajo Refining Co. - Pipeline Division	Address (Give address to which approved copy of this form is to be sent)	North Freeman, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 25	Twp. 18S
	Rge. 27E	Is gas actually connected?	No
		When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2/18/80	2/27/80	2060	2060					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3575 KB	Grayburg-Metex	1942	1942					
Perforations	OH 1942-2060			Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
9 5/8	7 5/8	484'	SS					
6 3/4	5 1/2	1942'	150 sks Class C					
			50 Sk on ring Comp					

V. 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 top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3/21/80	3/21/80	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	--	--	--
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
45	9	36	TSTM

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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.

Janita D. Dole
(Signature)

Production Clerk

(Title)

March 26, 1980

(Date)

OIL CONSERVATION COMMISSION

MAR 27 1980

APPROVED _____, 19

BY *W. A. Gessett*

TITLE *SUPERVISOR, DISTRICT II*

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.