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GTATE OF NEW MEXICO HENGY AND MINERALS DEPARTMENT OIL CONSERVAT		FION DIVISION	form C-104 Revised 10-1-78	
DIST MINUT IDH	P. O. BOX	2080	RECEIVED BY	,
LAND OFFICE REQUEST FOR A			MAR 06 1984	
AUTHORI	AND ZATION TO TRANSPO	DRT OIL AND NATURAL	- · · · · · · · · · · · · · · · · · · ·	
Yates Petroleum Corporation		L	ARTESIA, OFFICE	
207 S. 4th St., Artesia, NM 88	210	· · ·		
	Transporter of:	Other (Please explo		· · · · · · · · · · · · · · · · · · ·
Recompletion Oil Change in Ownership XX Casinghea	d Gas Condense	Shut in		
If change of ownership give name and address of previous owner Newmont Oi	<u>l Company PO Bc</u>	ox 1305 Artesia, M	IM 88210	<u>. </u>
DESCRIPTION OF WELL AND LEASE	Pool Name, Including For	mation Kind	of Leose LC-0	58125 Lease No.
W. LOCO Hills G4S Ut Tr 9 2	Loco Hills Q	State	, Federal or Fee Fede:	ral
Unit Letter ; 330 Feet From	n The <u>South</u> Line	and <u>2310</u> Fe	el From The <u>East</u>	
Line of Section 3 Township 185	Range	29Е , ММРМ,		Eddy County
I. DESIGNATION OF TRANSPORTER OF OIL Name of Authorized Transporter of Cli or Co	AND NATURAL GAS	Aidiess (Give address to wh	ch approved copy of this	form is to be sent)
Name of Authorized Transporter of Casinghead Gas) or Dry Gas	Address (Give address to wh	ich approved copy of this	form is to be sent)
If well produces off or liquids, Unit Sec.	Twp. Rge.	Is gas actually connected?	when t	
give location of tarks.	y other lease or pool, g	ive commingling order nur	ber:	
Designate Type of Completion (X))11 Well Gas Well	New Well Workever D	eepen Plug Back	Same Resty, Diff. Rest
Date Spudded Date Compl. F	leady to Prod.	Total Depth	F.B.T.D.	
Elevations (DF, RKB, RT, GR, etc., Mame of Produ	ucing Formation	Top Oll/Gas Pay	Tubing Depth	
Perforations			Depth Casing	5
	UBING, CASING, AND	CEMENTING RECORD	540	CKS CEMENT
		ter recovery of total volume o	i i i load oil and must be es	ual to or exceed top offer
. TEST DATA AND REQUEST FOR ALLOWA OIL WELL Date First New Oil Run To Tanks Date of Test	BLE (Test must be all able for this der	Producing Mothod (Flow, pu		Post. 20-5
Length of Test Tubing Press	ستا	Casing Pressure	Chore Size	3-16-34 cho. 0.D.
Actual Prod. During Test Oil-Bbla.		Water - Bble.	Gas • MCF	
GAS WELL Actual Frod. Teet-MCF/D Length of Tee	it	Bbls. Condensate/MMCF	Gravity of C	ondeneate
Testing Method (pitot, back pr.) Tubing Press	wo (Shut-in)	Casing Pressure (Shut-in) Choke Size	
CERTIFICATE OF COMPLIANCE			SERVATION DIVIS	ION
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.		APPROVED MAR 1 3 1984		, 19
		BY BY LARRY BROOM GEOLOGIST - NMOCU		
04.		TITLE	filed in compliance w	ith nut 2 1104.
Jenni B. alleghorn		If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.		
Production Clark		All rections of this form must be filled out completely for allow able on new and recompleted wells. Fill out only Sections I. II. 111, and VI for changes of owne		
March 1, 1984 (Dule)		well uses of number, of	Autobolich of other a	uch change of condition or each pool in multip

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