GTATE OF NEW MEXICO VENGY AND MINERALS DEPARTMENT	OIL CONSERVA	TION DIVISION		Form C-164
		C 2088		2 19 6 1994
LAND GPPICE REQUEST FOR ALLOWABLE				O. C. D. TESIA, OFFICE
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
Yates Petroleum Corpor.	ation			
Address 207 S. 4th St., Artesi Reason(s) for filing (Check proper box)	a, NM 88210	Other (Please ex	plains	
New Well Change in Transporter of: Recompletion Oll Dry Gas				
Change in Ownership XX Casingheod Gas Condensate Pumping				
If change of ownership give name N and address of previous owner <u>N</u>	ewmont Oil Company PO B	ox 1305 Artesia,	NM 8821	0
DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Form Well No. Pool Name, Including Form		State Federal or Fee p. J		
Yates 4 Loco Hills O. G. SA Olde, Function Frederal Location Unit Letter K : 2310 Feet From The_South_Line and1650 Feet From The_West				
Line of Section 6 Town		ана <u>1000</u> 30е , ммрм,	eet i tom i m	Eddy County
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Cill or Condensate Navajo Refining Name of Authorized Transporter of Casinghead Gas		PO Box 175 Artesia, NM 88210 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 Sec. Twp. Rgc. E 6 18 30	Is gas actually connected? When NO		
If this production is commingled with COMPLETION DATA	that from any other lease or pool,			Plug Back - Same Hesty, Diff. Rest
Designate Type of Completion		Total Depth	1	P.B.T.D.
Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Same of Producing Formation	Top Oll/Gas Pay		Fubing Depth
Perforations			I	Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT
'. 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 (Fest 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 Nothod (Flow,)		etc.) $f' of f - f W - 5$ 3 - i f - 5 - 5 Choke Size $A - A - A$
Length of Test	Tubing Pressure	Casing Pressure		Gas - MCF
Actual Prod, During Test	Oil-Bbin.	ļ,		
GAS WELL Actual Prod. Test-MCF/D	Longth of Test	Bbls. Condensate/MMCF		Gravity of Condensate
Testing Method (pitor, back pr.)	Tubing Presews (Shut-in)	Cosing Pressure (Shut-1	n)	Choko Sixo
. CERTIFICATE OF COMPLIANC	CE	OIL CO	VSERVATIO	DN DIVISION
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		
Jenni B. Lleghorn		If this is a request for allowable for a newly drilled or deepeness well, this form must be accompanied by a tabulation of the deviation tonic tabon on the well in accordance with MULE 111.		
March 1, 1984		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.		
(Date)		Fill out only Sections 1. If the nucleon change of condition well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiply		
