

NO. OF COPIES RECEIVED 6
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
PRORATION OFFICE

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED
AUG 8 1967
O. C. C.
ARTESIA, OFFICE

Yates Petroleum Corporation

207 So. 4th St., Artesia, New Mexico

Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Dry Gas ☐ Oil ☒
Re-completion ☐ Castinhead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE
Lease Name Martin Well No. 4 Pool Name, including Formation Atoka San Andres Kind of Lease State, Federal or Free Fee
Location 0 500 Feet From The S Line and 2070 Feet From The E
Unit Letter O Township 18S Range 26E, NMFM, Eddy County
Line of Section 15

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Scurlock Oil Company Address (Give address to which approved copy of this form is to be sent) 414 Mid-America Bldg., Midland, Texas
Name of Authorized Transporter of Castinhead Gas ☒ or Dry Gas ☐ Phillips Petroleum Co. Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 15 Twp. 18S Rge. 26E Is gas actually connected? Yes When 1/67

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

VI. COMPLETION DATA
Designate Type of Completion - (X)
Date Spudded Date Compl. Ready to Prod. Total Depth F.R.T.D.
Pool Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

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 Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas - MCF

GAS WELL
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MCF Gravity of Condensate
Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure 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.
Hugh H. Parrey
(Signature)
Secretary-Treasurer
(Title)
8/4/67
(Date)

OIL CONSERVATION COMMISSION
AUG 10 1967
APPROVED BY W. A. Gressett
TITLE OIL AND GAS INSPECTOR
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 allow-able on new and recompleted wells.
Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.