NO. OF COPIES REC	6	-	
DISTRIBUTIO			
SANTA FE	7		
FILE	/-		
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	/	
	GAS		
OPERATOR	3		
PRORATION OF			
Operator			
Yates Petrol	eum (	Corp	01
Addrose			

	DISTRIBUTION							
	SANTA FE		ONSERVATION COMMISSION	Form C-104				
	FILE /_	KEQUES!	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65				
	U.S.G.S.	AUTHODIZATION TO TO	AND ANSPORT OIL AND NATURAL G	AS REDEINER				
	LAND OFFICE	AUTHORIZATION TO TRA	MISPORT OIL AND NATURAL G	743				
	TRANSPORTER   OIL   GAS			967				
	OPERATOR 3			the see you				
I.	PRORATION OFFICE Operator			* * * * * * * * * * * * * * * * * * *				
	Yates Petroleum Corporation							
		es BldgArtesia, New Me	xico					
	Reason(s) for filing (Check proper box)		Other (Please explain)					
	New Well	Change in Transporter of:						
	Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder						
	Change in Ownership	Cashighed das Conder	isde					
	If change of ownership give name and address of previous owner		·					
II.	DESCRIPTION OF WELL AND I							
	Lease Name		me, Including Formation	Kind of Lease				
	Wilkinson "AZ"	l Pena	sco Draw S.A. Yeso	State, Federal or Fee Fee				
	Unit Letter N; 23]	O Feet From The West Lin	e and 990 Feet From T	The South				
	Line of Section 25 , Tow	rnship 18S Range	25E , nmpm,	Eddy County				
	Line of Section 29 7 10th	many 200 Manage	, 11th ay	Journa				
II.	DESIGNATION OF TRANSPORT		Address (Give address to which approx	ped copy of this form is to be sent)				
	The Permian Corporation		P.O. Box 3119, Midlan	d. Texas				
	Name of Authorized Transporter of Cas		Address (Give address to which approx					
		li	Is gas actually connected? . Whe					
	If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   N   25   18S   25E	Is gas actually connected? Whe	en .				
	If this production is commingled wit	<u> </u>	L					
v.	COMPLETION DATA	n that from any other lease or poor,	<del></del>					
	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. D. f. Res'v.				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	5-19 <b>-</b> 67	6-30-67	5120'	3400'/Bridge Plugs				
	Pool .	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
	Penasco S.A. Yeso	S.A. Yeso	1395'	3000'				
	Perforations 70/3185-32551	620; 70/2190-2250; 70/24	10-25101 70/3000-30501	Depth Casing Shoe				
	70/1395-1450; 70/1555-16		CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	12 <del>1</del> n	9=5/8"	1040'	645				
	8-3/4 "	7"	5117'	900				
	8=3/4 <sup>11</sup>	2-3/8 "	30001					
٧.	OIL WELL	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)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	(t, etc.)				
	6-30-67	7-1-67	Pumping  Casing Pressure	Choke Size				
	Length of Test	Tubing Pressure	- saing Pressure	Choke Size				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF				
	84	54	30 LW	TSTM				
	CAC WELL							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size				
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERVA	TION COMMISSION				
			1067					
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.		APPROVED, 19						
		BY W. C. Dressett						
		TITLE 1981 OIL AND GAS INSPECTION						
		This form is to be filed in compliance with RULE 1104.						
MK (Amilleria			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.					
(Signature) Agent								
		All sections of this form must be filled out completely for allow-						
	(Title) <b>7-6-67</b> (Date)		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.					
	,		- ·					

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.