## NO. OF COPIES RECEIVED 6 DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C -104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE SANTA FE Effective 1-1-65 FILE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ECEIVED u.s.g.s. LAND OFFICE OIL TRANSPORTER -GAS OPERATOR PRORATION OFFICE Contrator Yates Petroleum Corporation Address 309 Carper Building-Artesia, Lew Mexico 88210 Reason(s) for filing (Check proper box) Other (Please explain) $\mathbf{X}$ Change in Transporter of: New Well Dry Gas Oil Casinghead Gas Condensate Change in Ownership If change of ownership give name and address of previous owner \_\_\_ II. DESCRIPTION OF WELL AND LEASE Well No. Pccl Name, including Formation 1 Penascc Draw S.A. Yeso State, Federal or Fee Fee "BB" Mobil \_\_Line and \_\_330 Feet From The Rast South Feet From The Eddy Range 25E NMPM. Line of Section 24185 , Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil X or Condensate P. O. Box 3119 Mid and, Texas Address (Give address to which approved copy of the form is to be sent) The Permian Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas When Sec. Is gas actually connected? Rge. Unit Twp. If well produces oil or liquids, 18 24 25 give location of tanks. 0 NoIf this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Resty, Diff. Resty, New Well Designate Type of Completion -(X) $\mathbf{X}$ $\times$ P.B.T.D. Date Compl. Ready to Proa. otal Depth Date Spudded 3699' 57161 ઠ−৪−67 4-1-67 Top Oil/Gas Pay Tubing Depth Name of Producing Formation Pool <u>3</u>205 2500' Penasco Draw S.A.Yeso S.A. Yeso Depth Casing Shoe 3699' 75/3205-3155;75/2530-2440;75/2295-2230;35/1510-1325 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 9**-**5/8" 1125' 225 sx. 12-1/4" 7" 3699**'** 630 sx 8-3/4" 2-3/8" 2500' (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Pumping 6-9-67 6-8-67 Choke Size Casing Pressure Length of Test Tubing Pressure Pumping Water-Bbls. Gas - MCF Actual Prod. During Test 30 Load Water TSTM 68 GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MUF/D Length of Test Tubing Pressure Casing Pressure Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE APPROVED. 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. OIL AND GAS INSPECTOR TITLE

111 e Cr. T.	
Agent Agent	_
(Tůle)	
6-12-67	

(Date)

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 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.