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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

I. Operator
Yates Petroleum Corporation
Address
207 So. 4th St. - Artesia, New Mexico 88210
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kincaid BI	Well No. 1	Pool Name, Including Formation Penasco Draw S.A. Yeso	Kind of Lease State, Federal or Fee Fee
Location Unit Letter B ; 660 Feet From The North Line and 1650 Feet From The East Line of Section 25 , Township 18S Range 25E , NMPM, Eddy County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> 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 Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 B Sec. 25 Twp. 18S Rge. 25E Is gas actually connected? No When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 6-19-67	Date Compl. Ready to Prod. 8-18-67	Total Depth 3300'	P.B.T.D. 3268'
Pool Penasco Draw S.A. Yeso.	Name of Producing Formation S.A. Yeso	Top Oil/Gas Pay 1440	Tubing Depth 2504
Perforations 3094-2919/51, 2544-2402/63, 2267-2248/60, 1500-1445/70			Depth Casing Shoe 3298
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12 1/2"	CASING & TUBING SIZE 9-5/8"	DEPTH SET 1097'	SACKS CEMENT 320 670
8-3/4"	7"	3298	500
	2"	2504'	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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 8-18-67	Date of Test 8-19-67	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 82	Oil-Bbls. 52	Water-Bbls. 30 BLW	Gas-MCF TSTM

GAS 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

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.

ML Armstrong
(Signature)
Agent
(Title)
8-21-67
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 22 1967, 19
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 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.