Name of Authorized Transporter of Casinghead Gas Nor Dry Gas Address (Give address to which approved copy of this form is to be Phillips Petroleum Company If well produces oil or liquids, Quit Sec. Twp. Page. Is gas actually connected? When give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv.	Lease No. 028990 County be sent) 79701
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS SEP 4 1969 OPERATOR PROPARTION OFFICE Operator Yates Petroleum Corporation Address 207 South 4th Street - Artesia, New Mexico 88210 Resemble in Change in Ownership Give name and address of previous owner Casinghead Gas Condensate If change of ownership give name and address of previous owner Creek "AL" DESCRIPTION OF WELL AND LEASE Lease Name Creek "AL" DESCRIPTION OF WELL AND LEASE Lease Name Creek "AL" DESCRIPTION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil And NATURAL GAS Name of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Oil And NATURAL GAS Nome of Authorized Transporter of Casinghead Gas Corp of pages Phillips Petroleum Company If well produces oil or Ilquids, June 1 lase of Day Gas Day Gas Gendensate Phillips Petroleum Company If well produces oil or Ilquids, June 1 lase of Day Gas Day Gas Gendensate Phillips Occapion of Transporter of Casinghead Gas Corp. Twp. Reg. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Reservation of Completion Casinghead Casing Corp. Plug Back Same Reservation Casinghead Casing Corp. Completion DATA Oil Well Gas Well Workover Deepen Plug Back Same Reservation Casinghead Cas	Lease No. 028990 County be sent) 79701
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Oil Well Gas Well New Well Workover Deepen Plug Back Same Resw.	
Designate Type of Completion (Y)	. Diff. Res
Designate Type of Completion - (X) X	<u> </u>
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.	
7-8-69 8-27-69 3426 Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth	
3604 GR Queen (Penrose) 3302 3186	
Perforations Depth Casing Shoe	
3302-3308/6; 3318-26/9; 3366-76/18	
TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET SACKS CEME	NT
HOLE SIZE CASING & TODING SIZE	M 1
10" 8-5/8" 770' 100 sx. 8" 5 1/2" 3426' 200 sx.	
2" EUE 3186'	
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 excaple able for this depth or be for full 24 hours)	ceed top allo
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)	
8-27-69 9-1-69 Pumping Tuhing Pressure Casing Pressure Choke Size	
Length of Test	
24 Actual Prod. During Test Oil-Bbis. Water-Bbis. Gas-MCF	
93 83 10 LW 83	
GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	···· ··
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size	
CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION	
OFD / SOM	
I hereby certify that the rules and regulations of the Oil Conservation	9
Commission have been complied with and that the information given if	
GIL AGE GES IESCENTES.	
TITLE	
This form is to be filed in compliance with RULE	1104.
	d or deeper the deviati

(Title)

(Date)

Agent

9-4-69

All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI 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