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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

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

REVISED AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JAN 17 1973

O. C. C.

ARTESIA, OFFICE

Operator Yates Petroleum Corporation	
Address 207 South 4th Street - Artesia, NM 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Creek "AL"	Well No. 11	Pool Name, including Formation Shugart	Kind of Lease State, Federal <input checked="" type="checkbox"/> LC028990(b)	Lease No.
Location Unit Letter <u>H</u> ; <u>660</u> Feet From The <u>East</u> Line and <u>1650</u> Feet From The <u>North</u> Line of Section <u>25</u> Township <u>18S</u> Range <u>30E</u> , NMPM, <u>Eddy</u> 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"/> Tex. N. Mex. Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510 Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) Box 6666 - Odessa, TX					
If well produces oil or liquids, give location of tanks.	Unit A C	Sec. 24	Twp. 18S	Rge. 30E	Is gas actually connected? Yes	When 12-30-72

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 8-12-72	Date Compl. Ready to Prod. 12-30-72		Total Depth 3728'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3587' GR	Name of Producing Formation Queen		Top Oil/Gas Pay 3351'		Tubing Depth 3304			
Perforations 3626' - 3351'					Depth Casing Shoe 3728'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10"	8-5/8" 24#		735'		100 sx			
8"	5 1/2" 15.5#		3728'		150 sx			

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 12-30-72	Date of Test 1-3-73	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 23	Oil-Bbls. 5	Water-Bbls. 18	Gas-MCF 6

GAS WELL

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

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.

Eddie M. Mahfood
(Signature)

Eddie M. Mahfood - Engineer

(Title)

1-16-73

(Date)

OIL CONSERVATION COMMISSION

JAN 17 1973

APPROVED

BY

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 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