ورباء بالالالالالالا NEW MEXICO OIL CONSERVATION COMMISSION TAFE Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 AND G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DOFFICE RECEIVED OIL TRANSPORTER GAS OPERATOR APR 22 1976 PRORATION OFFICE Yates Petroleum Corporation V O. C. C. RTEBIA, OFFICE 207 South 4th Street - Artesia, NM 88210 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Oil Dry Gas Change in Ownership Condensate If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Vell No. Pool Name, Including Formation Kind of Lease Dayton "FX" 1 Atoka San Andres State, Federal or Fee Location 1650 Feet From The South Line and 2200 West Feet From The 21 18S Line of Section 26E Township Eddy Ranae NMPM III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | | Or Condensate | Or Condens Agaress (Give address to which approved copy of this form is to be sent) Navajo Crude Oil Purchasing Company No. Freeman Ave - Artesia, NM 88210 Name of Authorized Transporter of Casinghead Gas XX or Dry Gas Address (Give address to which approved copy of this form is to be sent) Yates Petroleum Corporation 207 South 4th Street-Artesia, NM 88210 If well produces oil or liquids, Unit Sec. Rge. is gas actually connected? give location of tanks. 21 K 18S 26E Yes 4-9-76 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well Workover New Well Designate Type of Completion - (X) Plug Back Same Res'v. Diff. Res'v. Σ X Date Spudded Date Compl. Ready to Prod. ctal Depth P.B.T.D. 3-29-76 4-9-76 1760' 1705' Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth 3392' GR San Andres 1518' 1498' Perforations Depth Casing Shoe 1518-1652' 1705' TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 95" 1208 500 64" 4¹5&5¹5" 1705' 175 23/8 1498 V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total valume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) 4-9-76 4-18-76 Pumping Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Oil-Bbls. Water - Bbls. Gos - MCF 64.2 56.0 8.2 BLW 67 **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

I. 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.

Christine Tomlinson-Geol Secty

4-21-76

(Date)

(Title)

OIL CONSERVATION COMMISSION

Legse No.

County

APR 23 1976 APPROVED

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SUPERVISOR, DISTRICT II TITLE.

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.