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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

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SEP 28 1976

Operator Yates Petroleum Corporation	
Address 207 South 4th, Artesia, NM 88210	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of <input type="checkbox"/>
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 _____

DESCRIPTION OF WELL AND LEASE	
Lease Name Peon GK	Well No. 1 Pool Name, including Formation Atoka S. A.
Kind of Lease State, Federal or Fee Fee	
Lease No.	
Location	
Unit Letter D	330 Feet From The North Line and 330 Feet From The West
Line of Section 27	Township 18S Range 26E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Nor. Freeman Ave - Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 207 So. 4th Street - Artesia, NM 88210
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
D 27 18S 26E	Yes 9-24-76

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

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'tv. <input type="checkbox"/> Diff. Res'tv. <input type="checkbox"/>		
Date Spudded 9-12-76	Date Compl. Ready to Prod. 9-24-76		
Elevations (DF, RKB, RT, GR, etc.) 3355'	Name of Producing Formation San Andres		
Perforations 1648½-1726½'	Total Depth 1880'		
	Top Oil/Gas Pay 1648½'		
	Tubing Depth 1633'		
	Depth Casing Shoe 1862'		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9½"	7"	1214'	500
6¼"	4½&5½"	1862'	175
	2-3/8"	1633'	

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 9-24-76	Date of Test 9-27-76
Length of Test 24	Producing Method (Flow, pump, gas lift, etc.) Pumping
Actual Prod. During Test 95.2	Casing Pressure 30#
	Water-Bbls. 11.2 BLW
	Gas-MCF 142

GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
Testing Method (pistol, back pr.)	Tubing Pressure (Shut-in)
	Casing Pressure (Shut-in)
	Choke Size

CERTIFICATE OF COMPLIANCE

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
(Signature)
Secty - Christine Tomlinson
(Title)
9-28-76
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 29 1976, 19____

BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT II

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 deviator 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