

DISTRIBUTION	5	
INTAKE	1	
FILE	1	
S.G.S.		
AND OFFICE		
TRANSPORTER	OIL 1	
	GAS 1	
OPERATOR		
PROMOTION OFFICE	1	

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 1-1-85

RECEIVED

DEC 29 1981

O. C. D.
ARTESIA, OFFICE

Operator	Harvey E. Yates Company	
Address	Post Office Box 1933, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Change in lease name
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		State, Federal or Private	
Well Name	2	Travis Upper Penn	NM-23417
Section	G	1980	East
Foot from the	North	1780	East
Section	13	Township	18S
Range	28E	County	Eddy

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate XX	
Navajo Crude Oil Purchasing Company		N. Freeman Avenue, Artesia, N.M. 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas X		1800 Wilco Bldg, Midland, Texas 79701	
El Paso Natural Gas Company		Is gas actually connected? When	
Unit		yes 7/25/77	
Sec.			
Twp.			
Range			

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

COMPLETION DATA		Designate Type of Completion - (X)	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	Feet
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top of Oil/Gas Pay	Feet
Perforations		Depth of casing shoe	Feet

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 the amount allowable for this depth or be for full 24 hours)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION DEC 30 1981	
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.		APPROVED	
Perk Hardin (Signature) Engineer (Title) December 27, 1981 (Date)		BY Mike Williams 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 conditions. Separate Forms C-104 must be filed for each pool in multiple completed wells.	