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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-105  
Effective 1-1-65

RECEIVED

DEC 19 1977

Operator  
Yates Petroleum Corporation

ARTESIA, OFFICE

Address  
207 South 4th Street - Artesia, NM 88210

Reason(s) for filing (check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name White "IU"	Well No. 1	Pool Name <del>Undesignated</del> Yeso	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter I ; 1650 Feet From The South Line and 330 Feet From The East Line of Section 28 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 Company	Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave. - Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" 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 South 4th Street - Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 28	Twp. 18S	Rge. 26E	Is gas actually connected? Yes	When 11-28-77

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't. <input type="checkbox"/>	Diff. Res't. <input type="checkbox"/>
Date Spudded 10-21-77	Date Compl. Ready to Prod. 11-28-77		Total Depth 2874'		P.B.T.D. 2848'			
Elevations (DF, RKB, RT, CR, etc.) 3360' GR	Name of Producing Formation Yeso		Top Oil/Gas Pay 2417'		Tubing Depth 2400'			
Perforations 2417-2624'					Depth Casing Shoe 2848'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9 1/2"	7"	1125'	550
6-1/8"	4 1/2 & 5 1/2"	2848'	350
	2-3/8"	2400'	

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks 11-28-77	Date of Test 12-10-77	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 25#	Casing Pressure 25#	Choke Size 2"
Actual Prod. During Test 162	Oil-Bbls. 17	Water-Bbls. 145	Gas-MCF 41

12-23-77

GAS WELL

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

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

12-15-77

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

W. A. Gussitt  
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 cavity 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.