

**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**

OCT 11 1979

**O. C. C.  
ARTESIA, OFFICE**

|                   |       |       |
|-------------------|-------|-------|
| FILE              | /     | /     |
| G.S.              | /     | /     |
| LOCAL OFFICE      | /     | /     |
| TRANSPORTER       | OIL / | GAS / |
| OPERATOR          | /     | /     |
| PRODUCTION OFFICE | /     | /     |

**I. OPERATOR**

Operator: Yates Petroleum Corporation

Address: 207 South 4th Street, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box):  
 New Well       Change in Transporter of:  
 Recompletion       Oil       Dry Gas   
 Change in Ownership       Casinghead Gas       Condensate

Other (Please explain): \_\_\_\_\_

If change of ownership give name and address of previous owner: \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

|  |                      |   |   |           |
|--|----------------------|---|---|-----------|
| Lease Name<br><u>White IU</u>  | Well No.<br><u>1</u> | Pool Name, including Formation<br><u>Atoka San Andres</u> | Kind of Lease<br>State, Federal or Fee      Fee | Lease No. |
| Location<br>Unit Letter <u>I</u> ; <u>1650</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u><br>Line of Section <u>28</u> Township <u>18S</u> Range <u>26E</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"/><br><u>Navajo Crude Oil Purchasing Co.</u> | Address (Give address to which approved copy of this form is to be sent)<br><u>N. Freeman Ave. - Artesia, New Mexico 88210</u> |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/><br><u>Yates Petroleum Corporation</u>        | Address (Give address to which approved copy of this form is to be sent)<br><u>207 S. 4th Street, Artesia, NM 88210</u>        |
| If well produces oil or liquids, give location of tanks.<br>Unit <u>H</u> Sec. <u>28</u> Twp. <u>18</u> Rge. <u>26</u>                                     | Is gas actually connected? <u>Yes</u> When <u>11/28/67</u>   |

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                       | New Well                    | Workover | Deepen | Plug Back <input checked="" type="checkbox"/> | Same Res'v. | Diff. Res'v. <input checked="" type="checkbox"/> |
| Date Spudded<br><u>10/21/77</u>                      | Date Compl. Ready to Prod.<br><u>11/28/79 10-1-79</u> | Total Depth<br><u>2874</u>     | P.B.T.D.<br><u>2315</u>     |          |        |   |             |  |
| Elevations (DF, RKB, RT, GR, etc.)<br><u>3360 GR</u> | Name of Producing Formation<br><u>San Andres</u>      | Top Oil/Gas Pay<br><u>1598</u> | Tubing Depth<br><u>1800</u> |          |        |   |             |  |
| Perforations<br><u>1598-1695 (27 shots)</u>          | Depth Casing Shoe<br><u>2848</u>                      |                                |                             |          |        |   |             |  |

**TUBING, CASING, AND CEMENTING RECORD**

| HOLE SIZE     | CASING & TUBING SIZE       | DEPTH SET    | SACKS CEMENT |
|---------------|----------------------------|--------------|--------------|
| <u>9 1/2"</u> | <u>7"</u>                  | <u>1125'</u> | <u>550</u>   |
| <u>6 1/8"</u> | <u>4 1/2" &amp; 5 1/2"</u> | <u>2848</u>  | <u>350</u>   |
|               | <u>2 7/8"</u>              | <u>1800</u>  |              |

**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<br><u>10/1/79</u> | Date of Test<br><u>10/2/79</u>    | Producing Method (Flow, pump, gas lift, etc.)<br><u>Pumping</u> |
| Length of Test<br><u>24 hours</u>                 | Tubing Pressure<br><u>35 psig</u> | Casing Pressure<br><u>35 psig</u>                               |
| Actual Prod. During Test<br><u>19 BF</u>          | Oil - Bbls.<br><u>17</u>          | Water - Bbls.<br><u>2</u>                                       |
|   |                                   | Gas - MCF<br><u>23</u>  |

**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.

[Signature]  
Engineer  
(Title)  
October 10, 1979  
(Date)

**OIL CONSERVATION COMMISSION**

OCT 12 1979

APPROVED \_\_\_\_\_ 19\_\_\_\_

BY [Signature]  
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.