

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
FEB -7 '90
Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page
DISTRICT I
V.T.
G.T.
D.P.

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Harvey E. Yates Company Well API No. 30-015-26258
Address P.O. Box 1933, Roswell, New Mexico 88202
Reason(s) for Filing (Check proper box) ☒ New Well ☐ Recompletion ☐ Change in Operator ☐ Other (Please explain) ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE
Lease Name Arco 5 Federal Well No. #2 Pool Name, including Formation North Shugart-Bone Springs Kind of Lease State, Federal or Fee Lease No. NM-68038
Location Unit Letter G : 2310 Feet From The North Line and 2310 Feet From The East Line
Section 5 Township 18S Range 31E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent) Pride Pipeline Company P.O. Box 2436, Abilene, Texas 79604
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent) Conoco, Inc. P.O. Box 2197, Houston, Texas 77252
If well produces oil or liquids, give location of tanks. Unit G Sec. 5 Twp. 18 Rge. 31 Is gas actually connected? ☒ When? 2-15-90

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well XX Gas Well New Well XX Workover Deepen Plug Back Same Res'v Diff Res'v
Date Spudded 12/18/89 Date Compl. Ready to Prod. 1/30/90 Total Depth 8470 P.B.T.D. 8415
Elevations (DF, RKB, RT, GR, etc.) 3631.0 GL Name of Producing Formation Bone Springs Top Oil/Gas Pay 7736 Tubing Depth 7491
Perforations 7736-8363 Depth Casing Shoe 8470
TUBING, CASING AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17 1/2 13 3/8 300 325 Port ID-2
12 1/4 8 5/8 1960 1100 3-2-90
7 7/8 5 1/2 8470 1350 comp & BK
2 3/8 7491

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 Tank 2/1/90 Date of Test 2/5/90 Producing Method (Flow, pump, gas lift, etc.) Pumping
Length of Test 24 hrs Tubing Pressure 0 Casing Pressure 0 Choke Size 0
Actual Prod. During Test 214 Oil - Bbls. 139 Water - Bbls. 75 Gas - MCF 102

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Signature NM Young Drlg Superintendent
Printed Name 2/6/90 Title (505) 623-6601
Date Telephone No.

OIL CONSERVATION DIVISION
Date Approved FEB 23 1990
By ORIGINAL SIGNED BY MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.