

DISTRIBUTION
 SANTA FE
 FILE
 USDAO
 LAND OFFICE
 TRANSPORTER
 OIL
 GAS
 OPERATOR
 PRODUCTION OFFICE

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 1-1-64

RECEIVED

JUL 1 1969

ARTESIA, OFFICE

Yates Petroleum Corporation

207 South Fourth Street, Artesia, New Mexico

Reasons for filing (check proper box)

Other (Please explain)

New Well ☐ Change in Transporter of:
 Recompletion ☐ Oil ☒ Dry Gas ☐
 Transporter (New or Old) ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Mesa State Well No.: 2 Pool Name, including Formation: Artesia Kind of Lease: State, Federal or Fee State
 Location: Unit Letter: D 330 Feet From The North Line and 990 Feet From The West
 Line of Section: 4 Township: 19S Range: 28E NMPN, 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):
 Navajo Refining Company Pipe Line Div. P. O. Box 67, Artesia, New Mexico 88210
 Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent):
 If well produces oil or liquids, give location of tanks: Unit: D Sec: 4 Twp: 19S Rge: 28E Is gas actually connected? 11c When:

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 Gas Well New Well Workover Deepen Plug Back Same Rest'v. Diff. Rest'v.
 Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
 Foot Name of Producing Formation Top Oil/Gas Pay Tubing Depth
 Perforations Depth Casing Shoe
 TUBING, CASING, AND CEMENTING RECORD
 HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

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 Prod. To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
 Length of Test Tubing Pressure Casing Pressure Casing Size
 Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF

GAS WELL

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

OIL CONSERVATION COMMISSION

APPROVED JUN 16 1969
 BY W. P. Brissett
 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 1104.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each well in conformity

Production Clerk

6/20/69