NEW .AEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

New Well

REQUEST FOR (OIL) - (CAS) ALLOWABLE

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

			-	·	Artesia (Place)	, New	Mexico	Jama	(Date)
E ARI	e Heri	EBY RE	QUESTI	NG AN ALLOWABL	E FOR A WELL KI	NOWN	AS:	019	
de et		- Yat	es St	ate 618 Tr.	15 Well No.	14	in	JE N. Gui	1/4
(Compan	y or Oper Sec	14	. T. 19 S. R.	(Lease) 28 E , NMPM.,	Und	lesigna	ted	Ро
•••••	•••••		y	County. Date Spud	ided 12-8-58 433 DF Tota	l Depth	2043	PBTD	
P	lease in	dicate lo	cation:	Top Oil/Gas Pay	.784.1 Name	of Prod.	Form. Q	ueen	
D	C	В	A	PRODUCING INTERVAL					
	1			174	L_0L1 1831	-44			
E	F	G	H		Dept Casi	h Ing Shoe	1913'	Depth Tubing	1780'
	0		-						
L	K	J	I	OIL WELL TEST -	35 bls.oil,	0		24	Chok
м	N		P	Test After Acid or	Fracture Treatment (aft	ter recove	ry of volum	e of oil ec	Choke
	41				bbls.oil,	bbis v	ater in		
				GAS WELL TEST -					
198	0' N	& W		- Natural Prod. Test:	MCF/	Day; Hour	s flowed	Choke	Size
bing,	Casing	and Gemen	ting Recon		pitot, back pressure, e				
Size		Feet	Sax	Test After Acid or	Fracture Treatment:		MCF	/Day; Hours	s flowed
L 1	12 1	1913	750	Choke Size	_Method of Testing:				
				Acid or Fracture Tr	eatment (Gi ve amounts o	of materia	ls used, su	ch as acid,	water, oil, an
				(and): 25.00(0 mala. / 50.0	000 # :	d.		
28	-	1780	1	Casing 520 Pr	bing 400 Date firs	st new to tanks	JANNE	r 13.	1959
				Citi Transporter	alco Kefinerio	na. In	e. (P.	L. Div	r.)
		1			-				
				Gas Iransporter					
	3 i		•••••						•••••••••••••••••••••••••••••••••••••••
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TL	orobar c	antifu the		rmation given above	is true and complete t	to the bes	t of my kno	wledge.	
	ereby 0	1	AN 1						•••••••••••••••••••••••••••••••••••••••
hine			******		X	(Company or C	perator)	
	OIL	CONSER	VATION	COMMISSION	By: 2	\mathcal{L}_{i}	(Signatu		0 K
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	••••••						rn - Ya		
					Address	P. 0.	Box 42	7, Ar	tesia, N.

NEW MEXICO OIL CONSERVATION COMMISSIONForm C-110SANTA FE, NEW MEXICORevised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company	or Operator_	Western - Tates	[Lease	State 648	Tr. 15
		nit Letter P S 14 T :				
County	Eddy	Kind of Lease (State, Fed. or]	Patented)	State	
If well pr	oduces oil or	condensate, give locati	on of tanks:Unit	<u>K</u> S <u>1</u>	4 T 195	R_28E
Authorize	ed Transporte	er of Oil ph/ tohat atte	Malco Refineri	es, Ije	. (P. L.	Div.)
Address_	P. O. Be (Give addi	x 125, Artesia, N ress to which approved of	ow Mexice opy of this form	n is to be	sent)	
		er of Gas None				
Address	_					
If Gas is	•	ress to which approved o d, give reasons and also				
Nc	pipe line	outlet, gas is blown	to air.		. <u></u>	
<u></u>						
Reasons	for Filing:(P	ease check proper box)	New Well			KX)
the second se		r of (Check One): Oil ()		C'head () Condensa	ite()
Change in	n Ownership	()	Other			()
Remarks			Give	e explana	tion below)	

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this	the 13th day of Ja	nua ry	19 <u>59</u>	
Approved	1. 1. 1 . 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	19	By <u> </u>	Dist. Supt.
	NSER VATION COM	MISSION	Company	Western - Yates
ву Ш.С	A. Gresser	4	Address_	P. 0. Box 427
Title	NU GEN HILFEGIÖR			Artesia, New Mexico

FORM C-103 (Rev 3-55)
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Range 28 E
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Completion Date
Completion Date g Depth
g Depth Gas Well Potentia
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g Depth g Depth Gas Well Potentia MCFPD

		N	EW MEXI	CO OIL C	ONSE	RVA		COMMISSI	ON			FORM C-103
				LANEOU								(Rev 3-55)
		/e ·								061		
		(Submi	it to appropi	riate Distri			<u>.</u>	mission R	/ie 10			
Name of Company	Wet	stern -	Tates			Addres P.		box 427		Artes	sia,	New Mexico
Lease Stat	• 648	Tr	. 15	Well No. 146	Unit L	Letter	Section	Township	3		Range	28 E
Date Work Perform		Pool		gnated	<u>-</u> ۲ مر ۲	11	A	County	Eddy	<u>_</u>	· · · · · · · · · · · · · · · · · · ·	
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2nd stage	- 19]	- 19 1	orvk u	45 .1/UL	<i>7∏</i> 8,1	10 6	- Tal (4	ng t ràis	230	UT 60		~7
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	Lore	F		Field LOW FOR F ORIG	REMED	IAL W		West EPORTS O	NLY			
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D F Elev.	Lore	F		Field LOW FOR F ORIG	REMED	IAL W		West EPORTS O Producin	NLY		Cor	_
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