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NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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

REQUEST FOR (OIL) (GAS) ALLOWABLE

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New Well  
Recompletion

APR 9 1962

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 QUADRUPPLICATE 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, New Mexico April 5, 1962.  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

John A. Yates Caroline, Well No. 5, in NW 1/4 NW 1/4,  
(Company or Operator) (Lease)

D, Sec. 28, T. 19S, R. 28E, NMPM, East Millman Seven Riv. Pool  
Unit Letter

Eddy County. Date Spudded 2-12-62 Date Drilling Completed 3-6-62

Please indicate location:

D	C	B	A
O			
E	F	G	H
L	K	J	I
M	N	O	P

Elevation \_\_\_\_\_ Total Depth 1156 PBTD 1150

Top Oil/Gas Pay 1126 Name of Prod. Form. Seven Rivers

PRODUCING INTERVAL -

Perforations 1126-1130

Open Hole \_\_\_\_\_ Depth Casing Shoe 1156 Depth Tubing 1050

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 25 bbls. oil, 10 bbls water in 24 hrs, \_\_\_\_\_ min. Size Pumped

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

990/N 990/W  
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Size
7"	198	50
4 1/2"	1156	100
2/ 3/8	1050	

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 15000 Gal. Acid, 500 Bbls Oil & 50000# sand.

Casing Tubing Date first new April 5, 1962  
Press. Press. oil run to tanks

Oil Transporter The Permian Corporation

Gas Transporter Phillips Petroleum Co.

Remarks: This well on same forty acre tract as Caroline No. 3, and we request top-allowable for this Unit.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved \_\_\_\_\_, 1962, 19.

John A. Yates

(Company or Operator)

By: John A. Yates  
(Signature)

Bookkeeper

Title: Send Communications regarding well to:

Name: John A. Yates

323 Carver Bldg., Artesia, N. Mex.

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title: APR 9 1962

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NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**FORM C-110**  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>John A. Yates</b>			Lease <b>Caroline</b>		Well No. <b>5</b>
Unit Letter <b>D</b>	Section <b>28</b>	Township <b>19 S</b>	Range <b>28 E</b>	County <b>Eddy</b>	
Pool <b>East Millman Seven Rivers</b>			Kind of Lease (State, Fed, Fee) <b>State</b>		
If well produces oil or condensate give location of tanks		Unit Letter <b>C</b>	Section <b>28</b>	Township <b>19 S</b>	Range <b>28 E</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>The Permian Corporation</b>			Address (give address to which approved copy of this form is to be sent) <b>Box 3119, Midland, Texas.</b>		
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected <b>4-5-62</b>	Address (give address to which approved copy of this form is to be sent) <b>Bartlesville, Oklahoma.</b>		

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING** (please check proper box)

- New Well .....
- Change in Transporter (check one)
  - Oil .....  Dry Gas .....
  - Casing head gas .  Condensate . .

Change in Ownership ..... **RECEIVED**  
Other (explain below)

APR 9 1962  
**D. C. C.**  
ARTESIA, OFFICE

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.  
Executed this the **5th** day of **April**, 19 **62**.

OIL CONSERVATION COMMISSION		By <i>Neta Carter</i>
Approved by		Title <b>Bookkeeper</b>
Title <b>OIL AND GAS INSPECTOR</b> <i>M. L. Armstrong</i>		Company <b>John A. Yates</b>
Date <b>APR 9 1962</b>		Address <b>323 Carper Building, Artesia, New Mexico.</b>