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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 1-1-65

Operator		Artesia Petroleum Corporation
Address		207 South 4th Street - Artesia, New Mexico 88210
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	<input type="checkbox"/>	Change in Transporter of:
Commingling	<input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease
Nicholas "DJ"	1	Penasco Draw S.A. Yeso	State, Federal or Fee Fee
Location			
Section	1	330	East
Line and	2310	Feet From The	South
Range	5	Township 19S	Range 25E
			N.M.P.M., Eddy

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Scurlock Oil Company	414 Mid-America Bldg. Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
None						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	5	19S	25E	No	

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
X	X		X					
Date Spent	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2-21-68	2-23-68	1858	1858					
Pool	Name of Producing Formation	Top Oil/Gas Day	Tubing Depth					
Penasco Draw S.A. Yeso	San Andres	1480	1300					
Perforations			Depth Casing Shoe					
1480-1492'			1858					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10"	7" OD	923	800 SX
6-5/8"	4 1/2" OD	1858	85 SX
	2-3/8"	1300	-

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-27-68	2-28-68	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	20 1/2	20 1/2	- None
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
34 BBLD	16 BO	18 BW	TSTM

GAS WELL

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

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 _____, 19
BY W. A. Grasset
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.

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PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

MAR 4 1968

ARTESIA OFFICE

Operator Yates Petroleum Corporation	Address 207 South 4th Street - Artesia, New Mexico 88210
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>	Other (Please explain) Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Nicholas "BJ"	Well No. 1	Pool Name, Including Formation Penasco Draw S.A. Yeso	Kind of Lease State, Federal or Fee Fee
Location Unit Letter I ; 330 Feet From The East Line and 2310 Feet From The South Line of Section 5 , Township 19S Range 25E , NMPM, Eddy County			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock Oil Company	Address (Give address to which approved copy of this form is to be sent) 414 Mid-America Bldg. Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	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 I Sec. 5 Twp. 19S Rge. 25E Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 2-21-68	Date Compl. Ready to Prod. 2-23-68	Total Depth 1858	P.B.T.D. 1858					
Pool Penasco Draw S.A.	Name of Producing Formation Yeso San Andres	Top Oil/Gas Pay 1480	Tubing Depth 1300					
Perforations 1480-1492'	Depth Casing Shoe 1858							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 10" 6-5/8"	CASING & TUBING SIZE 7" OD 4 1/2" OD 2-3/8"		DEPTH SET 923 1858 1300		SACKS CEMENT 800 SX 85 SX -			

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 2-27-68	Date of Test 2-28-68	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 20#	Casing Pressure 20#	Choke Size - None
Actual Prod. During Test 34 BBLs	Oil-Bbls. 16 BO	Water-Bbls. 18 BLW	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

C. 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)
(Date)

OIL CONSERVATION COMMISSION
MAR 4 1968
APPROVED _____, 19_____
BY W. A. Gressett
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 111.

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 owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.