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DISTRIBUTION		SERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
SANTA FE		AND	Effective 1-1-65
U.S.G.S.		SPORT OIL AND NATURAL GA	S
	AUTHORIZATION TO TRAIN	ECEIVED	-
OIL	R	ECEIVEE	
TRANSPORTER GAS /		- 1072	
OPERATOR 1		JUN 1 3 1973	
PRORATION OFFICE			
Yates Petroleum C	Corporation K	D. C. C.	
Address		ARTESIA, OFFICE	
		88210	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Gas		
Change in Ownership	Casinghead Gas Condenso		
If change of ownership give name and address of previous owner		· · · ·	
DESCRIPTION OF WELL AND LI	Well No. Pool Name, Including For	mation St. grad Kind of LeaseN Style, Federal &	M-6026 Lease No.
Federal CM	1 Wildest	Lu St. J. Sigte, Federal	F/ee
Location			
Unit Letter / M ; 810	Feet From The South Line	and Feet From Th	e West
Unit Letteri			3
Line of Section 12 Town	aship 19S Range 24	E , NMPM, EO	County
DESIGNATION OF TRANSPORTI	or Condensate		d copy of this form is to be sent)
Name of Authorized Transporter of OII (Scurlock Oil Com	nany	1216 Vaughn BldgM	Aidland, TX 79701
Name of Authorized Transporter of Casinghead Gas 🗶 or Dry Gas		Address (Give address to which approve	ed copy of this form is to be sent)
Yates Petroleum	Corporation	207 South 4th Street	-Artesia, NM 88210
	Unit Sec. Twp. P.ge.	Is gas actually connected? When	1
If well produces oil or liquids, give location of tanks.	- M 12 19S 24E	Yes	6-12-73
If this production is commingled with		give commingling order number:	
If this production is commingled with . COMPLETION DATA	······································		Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion		X Total Depth	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.		
1-20-73	5-1-73 Name of Producing Formation	2002 ' Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	1	1021'	1000
3640'	San Andres Gard	1.023	Depth Casing Shoe
Perforations 2000	-1021		2002'
2000	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4"	10-3/4" 40#	304	150 sx
9-7/8"	7" 23#	790'	400_sx red 160' sx
64"	4½" 9.5 &5½"15.5#)Ta	dament and the second	•
	2" EUE (45"-1252 &	<u>53" 744) [000" (F06)</u>	and must be equal to or exceed top allow
. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	(t, etc.)
Date First New OII Run 10 Tunks			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Feudur of Lost			Gas-MCF
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gds-MCF
I	• m		· · · · ·
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	5.45	39
110	24 hrs. Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.) Orifice Well Tester	-	•	None
		OIL CONSERVA	ATION COMMISSION
I. CERTIFICATE OF COMPLIAN	CE	JUL 1719	72
	in the oil Conservation		, 19
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.		BY Mall A	
$O_{A} \leq \left(\right)$		mula from in to be filed in	compliance with RULE 1104.
Eldie he heatif. 11		If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation to the second accordance with RULE 111.	
EQUIE FI. FIGHLOOD	Title)	II -tis an mani and recompleted v	46178*
6-13-73		I wall nome or number, or unuer	II, III, and VI for changes of own rter, or other such change of condition
	Date)	Separate Forms C-104 mu	st be filed for each pool in multip
		buparate to the set of	