| NO. OF COPIES RE                          | EIVED 5   |   |   | ·  |  |  |
|---|---|---|---|--|--|--|
| DISTRIBUT                                 |   |   |   | Form C-104<br>Supercodes Old C-104 and C-110                                 |  |  |
| SANTA FE                                  |   |   | OR ALLOWABLE  | Supersedes Old C-104 and C-110<br>Effective 1-1-65                           |  |  |
| FILE                                      |   |   | AND   |  |  |  |
| U.S.G.S.                                  |   | AUTHORIZATION TO TRAN   | SPORT OIL AND NATURAL GA  | 45   |  |  |
| LAND OFFICE                               |   |   |   |  |  |  |
| TRANSPORTER                               | OIL   |   | RECEIVED  |  |  |  |
|   | GAS   |   | ·· -  |  |  |  |
| OPERATOR                                  | /   |   | 100101071   |  |  |  |
| PRORATION O                               | FICE  |   | APR 1 8 1974  |  |  |  |
| Operator                                  | Detroloum   | Corporation   |   |  |  |  |
| Yates                                     | Petroleum   | Corporation   | <del>0. C. C</del>  |  |  |  |
| Address                                   | 13. Ath Ct  | reet - Artesia, NM 88   | 3210 ARTESIA, OFFICE  |  |  |  |
| 1   |   |   |   |  |  |  |
| Reason(s) for filin                       | g (Check proper box)  |   |   | GAS MUST NOT BE  |  |  |
| New Well                                  | X   | Change in Transporter of:   |   |  |  |  |
| Recompletion                              |   | Oll Dry Gas   | INIESS AN   | EXCEPTION TO Rule 306  |  |  |
| Change in Owners                          | nip   | Casinghead Gas Condens  |   |  |  |  |
|   |   |   | 15 OBTAIL   | CAF FILE   |  |  |
| If change of owne<br>and address of p     | rship give name   | ·   | ·   | 6-12-74  |  |  |
| and address of p                          |   |   |   |  |  |  |
| DESCRIPTION                               | OF WELL AND   | LEASE   | Kind of Logso   | NM 043941 Lease No.  |  |  |
| Lease Name                                |   | Well No. Pool Name, Including For   |   |  |  |  |
| Feder                                     | al "CW"   | 1 Wildcat   | yrgte, reaerdi  | fr/F/ed.   |  |  |
| Location                                  |   |   |   |  |  |  |
| Unit Letter                               | N . 18  | 30 Feet From The West Line  | and 720 Feet From T   | he <u>South</u>  |  |  |
| Unit Letter                               |   |   |   |  |  |  |
| Line of Section                           | , 1 To  | wnship 19S Range  | 24E , NMPM, Edu   | dy County  |  |  |
| Line of Section                           |   |   |   | *  |  |  |
| DESCRIPTION                               | OF TRANSPOR   | TER OF OIL AND NATURAL GAS  | 6   |  |  |  |
| Nore of Authoriz                          | ed Transporter of Oi  | or Condensate   | Address force address to which approv   |  |  |  |
| Mavai                                     | o Crude Oi  | l PurchasingCo.   | No. Freeman Ave - A   | Artesia, NM 88210  |  |  |
| [iava]                                    | d Transporter of Ca   | singhead Gas or Dry Gas   | Address (Give address to which approv   | ed copy of this form is to be sent)  |  |  |
| Name of Authoriz                          | sa transporter or ou  |   | •   |  |  |  |
|   |   | Unit Sec. Twp. Ege.   | Is gas actually connected? Whe  | en la                                    |  |  |
| If well produces                          |   | $\begin{array}{c} \text{om} 1 \\ \text{N} \\ 1 \\ 198 \\ 24E \end{array}$ | NO  |  |  |  |
| give location of t                        |   |   |   |  |  |  |
| If this productio                         | is commingled with  | ith that from any other lease or pool, g                                  | give commingling order number:  |  |  |  |
| . COMPLETION                              | DATA  | Oil Well Gas Well   | New Well Workover Deepen  | Plug Back Same Res'v. Diff. Res'v.   |  |  |
| Duting                                    | Type of Completi  |   | X   |  |  |  |
| 0   | Type of domptoer  |   | Total Depth   | P.B.T.D.   |  |  |
| Date Spudded                              |   | Date Compl. Ready to Prod.  |   |  |  |  |
| 9-28-                                     | 74  | 3-25-74   | 9321<br>Top Oil/Gas Pay   | 5347<br>Tubing Depth   |  |  |
|   | RKB, RT, GR, etc.;  | Name of Producing Formation   | 1   | 5170'  |  |  |
| 367                                       | 6' GR   | Abo   | 5202 <sup>1</sup> 2'  | Depth Casing Shoe  |  |  |
| Perforations                              |   |   |   | 5347'  |  |  |
|   | 5202 <sup>1</sup> 2-  |   |   |  |  |  |
|   |   | TUBING, CASING, AND   | CEMENTING RECORD  |  |  |  |
| но  |   | CASING & TUBING SIZE  | DEPTH SET   | SACKS CEMENT   |  |  |
| 175"                                      |   | 13-3/8"   | 209'  | 100_sx   |  |  |
| $12\frac{1}{2}$                           |   | 9-5/8"  | 891'  | 650  |  |  |
| 8-3/4                                     | 11  | 55"   | 5347'   | 200 sx   |  |  |
| 0.0/1                                     |   | 2-3/8"  | 5170'   |  |  |  |
|   |   | FOR ALLOWABLE (Test must be a   | fter recovery of total volume of load oil   | and must be equal to or exceed top allow                                     |  |  |
|   | AND REQUEST I   | FOR ALLOWABLE (Test must be a able for this de                            | pth or be for full 24 hours)  |  |  |  |
| OIL WELL                                  | Oil Run To Tanks  | Date of Test  | Producing Method (Flow, pump, gas li  | ift, etc.)   |  |  |
|   |   | 4-10-74   | Pumping   | ·  |  |  |
| 3-25-                                     | / 4   | Tubing Pressure   | Casing Pressure   | Choke Size   |  |  |
| Length of Test<br>24 hr                   | c   | 15  | -   |  |  |  |
| 1   |   | Oil-Bbls.   | Water-Bbls.   | Gas - MCF  |  |  |
| Actual Prod. Du                           |   | 11.04   | 19  | 10.3   |  |  |
| 30.04                                     |   | 11.04   |   |  |  |  |
|   |   |   |   |  |  |  |
| GAS WELL                                  |   |   | Bbls. Condensate/MMCF   | Gravity of Condensate  |  |  |
| Actual Prod. T                            | st-MCF/D  | Length of Test  |   |  |  |  |
| Į   |   |   | Casing Pressure (Shut-in)   | Choke Size   |  |  |
| Testing Method                            | (pitot, back pr.)   | Tubing Pressure (Shut-in)   | Cubing Freesans (Survey and   | -  |  |  |
|   |   |   |   |  |  |  |
| L CERTIFICAT                              | TE OF COMPLIA   | NCE   |   | ATION COMMISSION   |  |  |
|   |   |   | 1 11 11 Lounder   |  |  |  |
| I have her and                            | v that the rules en   | d regulations of the Oil Conservation                                     |   |  |  |  |
|   |   |   |   |  |  |  |
| above is true                             | and complete to f   | the best of my knowledge and belief.                                      |   |  |  |  |
|   |   |   | TITLE OIL AND GAS INSPEC  | <i>j</i> va  |  |  |
| /   | <b>7</b> . 1  |   | This form is to be filed in compliance with RULE 1104.<br>If this is a request for allowable for a newly drilled or deepene<br>If this is a request be accompanied by a tabulation of the deviation |  |  |  |
| Ś   | della   | - Juglit I  |   |  |  |  |
| c c                                       | •   | / Luj   |   |  |  |  |
|   | •   | gnature)  | tests taken on the well in accordance with HULL   |  |  |  |
| Eddi                                      |   | od - Engineer   | All sections of this form must be filled out completely for allow   |  |  |  |
|   | (   | (Title)   | while on new and recompleted  | Wells.   |  |  |
|   | 4-18-74   | 4   | Fill out only Sections I.   | II. III, and VI for changes of own<br>orter, or other such change of conditi |  |  |
|   | the second se | (Date)  | well name or number, or thanapt   | ist be filed for each pool in multip   |  |  |
| 1. A. |   |   | Comp Collid mi  | Ist be med tot duen post   |  |  |

Separate Forms C-104 must be med to: 2200 port

| NEW MEXICO OIL CONSERVATION COMMISSION |               |                |             |                 |              |              |       |  |  |
|--|---------------|----------------|-------------|-----------------|--------------|--------------|-------|--|--|
| OPERATOR                               | Yates Petr    | roleum Corp.   | ADDRESS     | 207 South 4th   | St., Artesia | , New Mexico | 88210 |  |  |
| FIELD                                  | Wildcat       |                | LEASE       | Federal "CW"    |              | WELL NO. 1   |       |  |  |
| LOCATION                               | SE/4 of SV    | V/4 Section 1, | T-19-S, R-2 | 4-E, Eddy Count | y, New Mexic | ;0           |       |  |  |
|  |               |                | DEVIATION R | ECORD           |              |              |       |  |  |
|  |               |                | •           |                 |              |              | •     |  |  |
|  | Depth         | Degrees        |             | Depth           | Degrees      |              |       |  |  |
|  | 476           | 3/4            |             | 4964            | 1-1/4        |              |       |  |  |
|  | 891           | 1-1/4          | × .         | 5286            | 1-1/4        |              |       |  |  |
|  | 1050<br>1328- | 2-1/4<br>2-1/2 |             | 5863            | 3/4          |              |       |  |  |
|  | 1662          | 2-1/4          |             | 6392            | 3/4          |              |       |  |  |
|  | 2073          | 2-1/4          |             | 6795            | 1-1/4        |              |       |  |  |
|  | 2415          | 2              | -<br>-<br>- | 7165            | 1-1/4        |              |       |  |  |
|  | 2850          | 2              |             | 7462            | 3/4          |              |       |  |  |
|  | 3346          | 2              |             | 8002            | 3/4          |              |       |  |  |
|  | 3600          | 1-3/4          |             | 8575            | 3/4          |              |       |  |  |
|  | 3966          | 1-3/4          |             | 9315            | 3/4          |              |       |  |  |
|  | 4368          | 1              |             |                 |              |              |       |  |  |
|  |               |                |             |                 |              |              |       |  |  |

Certification of personal knowledge of Deviation Record:

1

4741

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information is true and complete.

L Signature Ard Drilling Company

Company

STATE OF TEXAS COUNTY OF MIDLAND

Before me, the undersigned authority, on this day personally appeared <u>J.E.R Sheeler</u>, known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is acting at the direction and on behalf of the operator of the well identified in this instrument and that such well was not intentionally deviated from the vertical.

eller Signature Manager-Ard Drilling Company Title

Sworn and Subscribed to before me, this the \_ 6th day of <u>December</u>, 19<u>73</u> an Notary Public in and for Midland County, Texas, S. R. McKINNEY, JR. Texas.

My commission expires:

June 1, 1975