ipim C-104 SANTA FE Superarder Old C-10s and C-11 Elloction 1-1-65 REQUEST FOR ALLOWABLE FILE **VHD** AUTHORIZATION TO TRANSPORT OIL AND MATURAL GAS U.S.G.5. LAND OFFICE RECEIVED OIL TRANSPORTER OPERATOR 1977 MAY 5 PROBATION OFFICE Operator Yates Petroleum Corporation ee ی: C. C. DIFFICE Address 88210 207 South 4th Street - Artesia, Other (Please explain) Reason(s) for filing (Check proper bos) Change in Transporter of: Dry Gas OIL Condensate Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner ___ R-5609 1-1-78 millman Stran H. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, including Formation Kind of Lease Lease No. state state E-641 Wildcat (Strawn) No. Millman Unit 1980 Feet From The North Line and 1980 Feet From The Ġ 198 28E Eddy , NMPM, County Range Township Line of Section II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Navajo Crude Oil Purchasing Company No. Freeman Ave - Artesia. NM 88210 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀 El Paso Natural Pipeline Company P. O. Box 1384, Ja1 88252 NM Unit Is gas actually connected? P.ge. Sec. Twp. If well produces oil or liquids, 19S_ 28E G <u>Yes</u> give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers COMPLETION DATA Same fiesty, Diff. Resty. Gas Well New Well Workover Deepen Plug Book Designate Type of Completion - (X) X Total Depth P.B.T.D. Date Spudded Date Compl. Ready to Prod. 10-16-76 11152' 10602' 3-21-77 Top Oil/Gas Pay Tuking Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 9792' 9733' 3523' GR Strawn Depth Casing Shoe Perforations 10977' 9792-9796 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 495 350 13-3/8" 17× 11" 8-5/8" 2439' 750 7-7/8" 43" 10977 575 2-3/8" 97331 (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Preducing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Cil Run To Tanks Choke Size Casing Pressure Length of Test Tubing Pressure Gae - MCF Weter - Bels. Actual Pred. During Test Oil-Bblo. GAS WELL Gravity of Condensate 2, Bbis. Condensets/MMCF Actual Fred. Test-MCF/D Length of Test 1560 TSTM Casing Pressure (Shut-in) Testing Mothed (pitot, back pr.) Tubing Prossure (Shui-lu) 1/2" 2500# Packer Back Pressure TI. 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)

(Dute)

Christine Tomlinson-Geol (Title)

5-5-77

OIL CONSERVATION COMMISSION MAY 1 2 1977

APPROVED

TITLE .

SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly delited or deepened well, this form must be accompenied by a tabulation of the deviation tests taken on the well in accordance with nucl. 111.

All sections of thin form must be filled out completely for allowable on now and recompleted wells.

FIII out only Coutlenn I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition