DISTRIBUTION		
SANTA FE	✓	
FILE	1	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL	1	
TRANSPORTER GAS	1	
OPERATOR	1	
PRORATION OFFICE		

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-
Effective 1-1-65

RECEIVED

AUG 21 1980

O. C. D.
ARTESIA, OFFICE

Operator

Yates Petroleum Corporation ✓

Address

207 South 4th Street - Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well [X]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ] Dry Gas [ ]
Casinghead Gas [ ] Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Mobil CI Federal	10	Penasco Draw SA Yeso (Ass	State, Federal or Fee Federal	NM-0352858-B

Location

Unit Letter L : 1650 Feet From The South Line and 990 Feet From The West

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 [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Company	No. Freeman Ave-Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Yates Petroleum Corporation	207 South 4th Street-Artesia, NM 88210

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	5	19S	25E	Yes	8-12-80

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'v.	Diff. Res.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
6-26-80	8-12-80	3029'	3005'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3595' GR	Yeso	2504'	2313'
Perforations			**Depth Casing Shoe**
2504'-2631'			3005'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	10-3/4"	380'	350
9½"	7"	966'	1000
6¼"	4½"	3005'	350
	2-3/8"	2313'	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
8-12-80	8-17-80	Pumping	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24	20#	20#	2"
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.**	**Gas - MCF**
15	9	6	58

GAS WELL

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

Christine Tomlinson
(Signature)

Christine Tomlinson-Geol. Secty
(Title)

8-21-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 26 1980, 19

BY W. A. Gressett

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 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 only Sections I, II, III, and VI for changes of operator, well name or number, or transporter, or other such change of condition.

INCLINATION REPORT

OPERATOR Yates Pet. Corp **ADDRESS** 207 S. 4th Street, Artesia, N.M. 88210

LEASE NAME Mobil CI FED. **WELL NO.** # 10 **FIELD**

LOCATION 1650' FSL, 990' FWL, Sec. 5, T 19S, R 25E

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
380	1/4	1.6720	1.6720
869	1/2	4.2543	5.9263
966	1/2	4.1499	10.0762
1459	3/4	6.4583	16.5345
1951	3/4	6.4452	22.9797
2445	3/4	6.4714	29.4511
3029	1/2	5.0808	34.5319

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AUG 21 1980

O. C. D.
ARTESIA, OFFICE

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

CACTUS DRILLING COMPANY

Rhonda Ford

TITLE Rhonda Ford, Office Manager

AFFIDAVIT:

Before me, the undersigned authority, appeared Rhonda Ford known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Rhonda Ford

AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 23rd day of July, 19 80

SEAL

OFFICIAL SEAL
SIGNATURE: Garlin R. Taylor
GARLIN R. TAYLOR
NOTARY PUBLIC NEW MEXICO
NOTARY BOND FILED WITH SECRETARY OF STATE
MY COMMISSION EXPIRES FEBRUARY 6, 1984

Notary Public in and for the County of Lea, State of New Mexico