BTATE OF NEW MEXICO RGY AND MINERALS DEPARTMENT OUT OF OFFICE OFFICE DISTRIBUTION TANTA FT	OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501		Form C-104 Revised 10-1-78 REGEIVED
1.U.8.			SEP 1 0 1981
ANSPONTEN OIL ANSPONTEN OIL OAS	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		O. C. D.
PHORATION OFFICE			ARTESIA, OFFICE
Yates Petr	oleum Corporation /		
	4th St., Artesia, NM 88210		
Reason(s) for filing (Check proper New Well X	boxj Change in Transporter ol:	Other (Please explain) Request 200 h	bls test allowable.
lecompletion	011 Dry G		
Change in Ownership	Casinghead Gas Conde	ensate	2615-24', 2702-11' Yates Seven Rivers
a change of ownership give nam and address of previous owner	e 		- <u>, p - 4, </u>
DESCRIPTION OF WELL AN	D LEASE		
Lease Name	Well No. Pool Name, Including F	Formation Kind of Lee	2000-0
Mesquite OG State	1 Und. Culwin	State, Fode	State V-21
Unii Letter L ;;	1650 Feet From The South Li	ne and <u>990</u> Feet From	n The West
	T. mship 18S Range	31е , ммрм,	Eddy Count
Line of Section 32	1. Whiship 100 Hunde	JIE , IMPM,	Eduly
ESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA	AS Address /five address to which app	roved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.		And:ess (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210	
Came of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)
	Unit Sec. Twp. Rge.	Is gas actually connected?	hen
If well produces oil or liquids, give location of tanks.	L 32 18S 31E		
	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Res
Designate Type of Comple			P.B.T.D.
Oate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.
iovations (DF, RKB, RT, GR, etc.	, Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	2561-69', 2615-24', 2702-	-11' – Yatos-Seven River	s
		D CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
EST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	.1 ifter recovery of total volume of load o	il and must be equal to or exceed top al
IL WELL Date First New Oil Run To Tanks	able for this de	epih or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)
Date First New OIL Hun 10 Tunks			
ongth of Test	Tubing Pressure	Casing Pressure	Choke Size
Catual Prod. During Test	Cil-Bble.	Water - Bbls.	Gan - MCF
AS WELL	Longth of Test	Bbls. Condensate/MMCF	Gravity of Condensate
"saling Method (pitot, back pr.)	Tubing Presews (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
ERTIFICATE OF COMPLIA	NCE		
hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED	
•			compliance with RULE 1104.
All and the second to the second		If this is a request for allowable for a newly drilled or deepen-	
(Signature)		 tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for allo able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filled for each pool in multip 	
Engineering Secretary (Tule)			
9-10-81 (Date)			