

AUG 31 '90 OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Harvey E. Yates Company		Well API No. 30-015-26412
Address P.O. Box 1933, Roswell, New Mexico 88202		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

Lease Name SST	Well No. #4	Pool Name, Including Formation Palmillo Bone Springs	Kind of Lease (State) Federal or Fee	Lease No. V-689
Location Unit Letter F : 2030 Feet From The North Line and 1697 Feet From The West Line Section 6 Township 19S Range 29E, NMPM, Eddy County				

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline Company		Address (Give address to which approved copy of this form is to be sent) P.O. Box 2436, Abilene, Texas 79604				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 6	Twp. 19	Rge. 29	Is gas actually connected? No	When ?

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 7/3/90	Date Compl. Ready to Prod. 8/7/90	Total Depth 7882		P.B.T.D. 7818					
Elevations (DF, RKB, RT, GR, etc.) 3386.7 GL	Name of Producing Formation Bone Springs		Top Oil/Gas Pay 7550		Tubing Depth 7350				
Performations 7550-7628'				Depth Casing Shoe 7882					
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2	13 3/8		327		475 Post ID-2				
12 1/4	8 5/8		1200		900 9-21-90				
7 7/8	5 1/2		7882		1500 Pump & BK				
	2 3/8		7350						

OIL WELL (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.)			
Date First New Oil Run To Tank 8/10/90	Date of Test 8/27/90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 0	Casing Pressure 0	Choke Size 0
Actual Prod. During Test 194	Oil - Bbls. 144	Water - Bbls. 50	Gas - MCF 120

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE	
I 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.	
Signature V. Teel	Production Sec. Title
Printed Name 8/28/90	(505) 623-6601
Date	Telephone No.

OIL CONSERVATION DIVISION	
Date Approved SEP 18 1990	
By	ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II
Title	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.