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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

APR 3 0 1991

O. Drawer DD, Artesia, NM 88210		Santa		-	ico 87504	87504-2088 O. C. D.				
ISTRICT III DO Rio Brazos Rd., Aztec, NM 87410	חבטעבי		•		E AND A			esia, Offi	 E	
perator	TO TRANSPORT OIL AND NATURA						Well API No.			
YATES PETROLEUM COI	LEUM CORPORATION						30-015-26610			
ddress 105 South 4th St., A	Artesia,	NM 8	8210						***	
eason(s) for Filing (Check proper box)			_		Other	(Please expla	in)			
lew Well		ange in Tra	-	7						
ecompletion	Oil Casinghead G		y Gas L ndensate	=						
hange in Operator	Camagnesia Co	<u> </u>	nacame [='						
d address of previous operator										· · · · · · · · · · · · · · · · · · ·
I. DESCRIPTION OF WELL A	ND LEAST	E								
case Name	Welt No Pool Name Includia				g Formation Kind of Penn Penn Kind of					
Hill View AHE Federal	Com	7 S	outh Da	agge	r Draw	Jpper Pe	ייקרון חח		7 NH 04	7214
ocation Unit LetterM	:660	Fe	et From The	So_So	uth Line	600	Fee	at From The _	West	Line
Section 13 Township	20S			4E	, NM	PM,	Ed	dy		County
	on a name	OR OH	A RIPS BY A	ari in	242 14					
II. DESIGNATION OF TRANS Name of Authorized Transporter of Oil		Condensale		LIUK	AL UAS Address (Give	address to wi	ich approved	copy of this fo	orm is to be se	u)
Permian Operating Lim	ited Par	tnersh	ip L	İ					251-1183	
Name of Authorized Transporter of Casing Yates Petroleum Corpo	horized Transporter of Casinghead Gas X or Dry Gas				Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210					
If well produces oil or liquids, jive location of tanks.					Is gas actually connected? Whe			4-13-91		
this production is commingled with that	from any other	lease or poo	ol, give com	mingli	ng order numb	ег:				
V. COMPLETION DATA									1	
Designate Type of Completion		Oil Well X	Gas W	cil	New Well X	Workover	Deepen	Plug Back 	Same Res'v	Diff Res'v
Date Spudded			_l rod,		Total Depth		.l	P.B.T.D.	.1	_!
3-12-91	Date Compl. Ready to Prod. 4-17-91				8260'			8201'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
3605' GR	Canyon				7763'			7703 Depth Casing Shoe		
Perforations 7763-7803 [†]								826		
7703-7803	יור י	IRING C	'ASING	AND	CEMENTI	NG RECO	SD.			
HOLE SIZE	CASING & TUBING SIZE				CEMENTING RECORD DEPTH SET			SACKS CEMENT		
26"	20"				40'			Redi-Mix Int ID-2		
14-3/4"		9-5/8"			1215'			1525 sx 5-3-9/ 1975 sx 1ma + BK		
8-3/4"	1	7"			8260'			19	75 sx	no 4-61
		-7/8 ¹¹	D1 12			7703 '				<u>/</u>
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR AL	LLOWA	BLE Llord oil an	d must	he equal to or	exceed top a	llowable for th	is depth or be	for full 24 ho	urs.)
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test		1024 54 41		Producing M	ethod (Flow,	oump, gas lift,	elc.)		
4-13-91	4-17-91				Pumping			Choke Size		
Length of Test	Tubing Press	SUIC			Casing Press				c	
24 hrs	150				Water - Bbis	150		2" Gas- MCF		
Actual Prod. During Test 2174	Oil - Bbls. 91				Water - Doi		394			
GAS WELL								- (A	Condenses	
Actual Prod. Test - MCF/D	Length of T	'est			Bbis. Conde	nate/MMCF		Gravity of	Condensate	
	MC		in		Casino Dres	sure (Shut-in)		Choke Siz	ze	
Testing Method (pilot, back pr.)	Tubing Pres	mic (Sint.	ui)		Casing 1166					
VI. OPERATOR CERTIFICATION OF CERTIFICATION IN THE PROPERTY OF	rulations of the lad that the infor	Oil Conservention give	/ation	E		OIL CC		ATION	1 DIVISI 0 1991	ON
0										
A canta Sondlett					ByORIGINAL SIGNED BY					
S. Carrieron					MIKE WILLIAMS					
Juanita Goodlett - Production Supvr.					SUPERVISOR DISTRICT IF					

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

Printed Name

Date

4-26-91

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

SUPERVISOR, DISTRICT IT

2) All sections of this form must be filled out for allowable on new and recompleted wells.

(505) 748-1471

Title

Telephone No.

- 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.