Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89
See Instructions at Bottom of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088

RECEIVED

Santa Fe, New Mexico 87504-2088

MAR - 5 1992

1000 Rio Brazos Rd., Aztec, NM 87410	- DEOI	ICOT C	OD 41	1 01444	DIE AND AUTHORIS		mni)L		
I.					BLE AND AUTHORIZ L AND NATURAL GA		O. C. D.	£		
YATES PETROLEUM CORPORATION							Well API No.			
Address		30-015-26824								
105 South 4th St.,		a, NM	8821	.0						
Reason(s) for Filing (Check proper box) New Well	-		_		X Other (Please expla	in)				
Recompletion	Oil	Change in	Transpor		Request 2000					
Change in Operator	Casinghea	id Gas 🔲	Conden		Perfor ation	s: 7748	3-7846 ' - C	anyon		
If change of operator give name and address of previous operator										
II. DESCRIPTION OF WELL	AND LE	ASE								
Lease Name	se Name Well No		Pool Name, Including Formation				Kind of Lease No.			
Thomas AJJ		3	Nort	h Dagg	er Draw U/Penn	State,	Federal of Fee			
Unit Letter J	. 19	80	Flori For		South Line and 1980			204		
2	_ ·	·	. rea riu		Line and 1300	F	et From TheE	ast Line		
Section 8 Townsh	ip 19S		Range	25E	, NMPM,	Eddy	·	County		
III. DESIGNATION OF TRAN	NSPORTE	R OF O	L ANE	NATU	RAL GAS					
Name of Authorized Transporter of Oil AMOCO PLOT Tonger of Denter of Condensate					Address (Give address to which approved copy of this form is to be sent)					
Amoco Pipeline Intercorportate Trucking Name of Authorized Transporter of Casinghead Gas or Dry Gas					P.O. Box 702068, Tulsa, OK 74170-2068 P.O. Box 702068, Tulsa, OK 74170-2068 Address (Give address to which approved copy of this form is to be sent)					
Traine of Audionized Transporter of Cash	gread Cas	لـــا	or Diy C	745 <u> </u>	Audiess (Give daaress to whi	cn approved	copy of this form is	t to be sent)		
If well produces oil or liquids, Unit ive location of tanks.		Sec.	Twp.	•	Is gas actually connected?	When				
f this production is commingled with that	121	<u> </u>	195	VNA	10		<u>3-6-92</u>			
V. COMPLETION DATA	nom any om	er rease or j	poor, give	comming	ing order number:					
Designate Time of Completion		Oil Well	G	s Well	New Well Workover	Deepen	Plug Back Same	Res'v Diff Res'v		
Designate Type of Completion Date Spudded	- (X) Date Comp	d Peady to	Prod		Total Depth	· · · · · · · · · · · · · · · · · · ·		l		
Date Spanier	Date Comp	n. Keady to	1100.		I com popul		P.B.T.D.			
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay		Tubing Depth			
Perforations	<u> </u>						Depth Casing Shoe			
								-		
					CEMENTING RECORD)	I			
HOLE SIZE	CAS	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT			
. TEST DATA AND REQUES	T FOR A	LLOWA	BLE				<u> </u>			
OIL WELL (Test must be after r	ecovery of tol	al volume o		and must	be equal to or exceed top allow			24 hours.)		
Date First New Oil Run To Tank	Date of Tes	t			Producing Method (Flow, pum	ıp, gas lift, e	tc.)			
ength of Test Tubing Pressure				Casing Pressure			Choke Size			
A L D L D L T L	Ou Die				Water Dhie		Gas- MCF			
Actual Prod. During Test	Oil - Bbls.	bls.			Water - Bbls.		Ose- MCL.			
GAS WELL	.1			····	Los					
Actual Prod. Test - MCF/D Length of Test					Bbls. Condensate/MMCF		Gravity of Condensate			
Antino Mathed failes hash and Antino December 1861					Coolea Desember (Chut in)		Choke Size			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)		CHURC SIEC				
VI. OPERATOR CERTIFIC	ATE OF	COMPI	LIANO	Œ						
I hereby certify that the rules and regul	ations of the (Oil Conserv	ation		OIL CONS	SERVA	ATION DIV	ISION		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					, Deta America !		MAR 51	992		
		/			Date Approved			· -		
Michelle Jaffet					By ORIGINAL SIGNED BY MIKE WILLIAMS					
	Froduct		·		SUP	: WILLIA ERVISOF	R, DISTRICT II			
Printed Name 3-5-92	(50)5) 748	Title -1471		Title	3				
Date			hone No.							

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.