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DISTRICT II
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DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

RECEIVED

MAR 18 1992

O. C. D.
ARTESIA OFFICE

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|--|-------------------------------------|
| Operator YATES PETROLEUM CORPORATION | | Well API No. 30-015-26938 |
| Address 105 South 4th St., Artesia, NM 88210 | | |
| Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator | | |
| <input checked="" type="checkbox"/> Other (Please explain) Well producing through LACT unit located Ross EG Fed. #3, NW/NE, Sec. 20-19S-25E | | |
| Change in Transporter of: 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 | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|---|---|--------------------------------|
| Lease Name Ross EG Federal | Well No. 6 | Pool Name, Including Formation North Dagger Draw U/Penn | Kind of Lease State, Federal or Fee | Lease No. NM 0557142 |
| Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line Section 20 Township 19S Range 25E , NMPM , Eddy County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|---|---|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Amoco PL Co. - Oil Tender Dept. | Address (Give address to which approved copy of this form is to be sent) PO Box 702068, Tulsa, OK 74170-2068 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Amoco Pipeline Intercompany Trucking | Address (Give address to which approved copy of this form is to be sent) PO Box 702068, Tulsa, OK 74170-2068 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation | 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, give location of tanks. | Unit B Sec. 20 Twp. 19S Rge. 25E Is gas actually connected? Yes When? 3-7-92 |

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

IV. COMPLETION DATA

| | | | | | | | | |
|---|--|---------------------------------|--|----------|--------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 2-4-92 | Date Compl. Ready to Prod. 3-15-92 | Total Depth 8300' | P.B.T.D. 8200' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3560' GR | Name of Producing Formation Canyon | Top Oil/Gas Pay 7786' | Tubing Depth 7892' | | | | | |
| Perforations 7786-7864' | Depth Casing Shoe 8300' | | | | | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 26" | 20" | 40' | Redi-Mix Port ID-1 | | | | | |
| 14-3/4" | 8-5/8" | 1093' | 1675 sx 4-3-92 | | | | | |
| 8-3/4" | 7" | 8300' | 1300 sx comp + BK | | | | | |
| | 2-7/8" | 7892' | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

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 3-7-92 | Date of Test 3-15-92 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hrs | Tubing Pressure 175 | Casing Pressure 180 | Choke Size 2" |
| Actual Prod. During Test 641 | Oil - Bbls. 378 | Water - Bbls. 263 | Gas - MCF 547 |

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 Juanita Goodlett
Printed Name **Juanita Goodlett - Production Supvr.**
Date **3-16-92** Title **(505) 748-1471**
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAR 27 1992**

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.