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

## State of New Mexico rgy, Minerals and Natural Resources Departn

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

APR 2 3 1993	Bottom of Page )
C. C. D.	Q

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator 30-015-26952 YATES PETROLEUM CORPORATION Address 105 South 4th St., Artesia, NM 88210 Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of Re-entered well & drilled to Morrow; □ Re-entry New Well plugged back to Canyon. \_\_\_ Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Pool Name, Including Formation Well No. Lease Name State/Federal or/Fte// NM 045275 South Dagger Draw U/Penn 9 Conoco AGK Federal Location Feet From The South Line and 860 Feet From The \_\_\_East\_ \_\_:\_\_660 Unit Letter P Eddy County 24E , NMPM, 20S Range Township 26 III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent)
502 N. West Avenue, Levelland, TX 79336 Name of Amhorized Transporter of Oil or Condensate
Amoco Pipeline Co. X

Amoco Pipeline Intercorporate Trucking Address (Give address to which approved copy of this form is to be sent) or Dry Gas [ Name of Authorized Transporter of Casinghead Gas X105 S. 4th St., Artesia, NM 88210 Yates Petroleum Corporation When ? Reconnected Is gas actually connected? Twp. 1 20 Rge. If well produces oil or liquids, Unit l Sec. 24 Yes 26 į G If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Diff Res'v Plug Back Same Res'v Gas Well New Well Workover Deepen Oil Well Х Designate Type of Completion - (X) Х Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Re-Entry 7950° 9640' 4-14-93 3-9-93 Tubing Depth 7641 Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 76701 3639' GR Canyon Depth Casing Shoe Perforations 8120' 7670-7719' TUBING, CASING AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 40' Redi-Mix 20" 26" <u> 1375 sx - circ (in place)</u> 1108 9-5/8" 14-3/4" 1425 sx - circ (in place) <u>7</u>" 8120' 8-3/4" 7641**'** V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)

[Participa Method (Flow, nump, gas lift, etc.) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Re-entry 4-3-93 Date of Test Flowing 4-14-93 Choke Size Casing Pressure Tubing Pressure Length of Test 1/2" Pkr 215 24 Gas- MCF Water - Bbls. Oil - Bbls. Actual Prod. During Test 742 633 102 735 **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test - MCF/D Length of Test Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation MAY 1 4 1993 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved . ORIGINALISIGNED BY o dissi

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

- Production Supvr.

(505)

Signature Juanita Goodlett

Printed Name

4-21-93

Date

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

Title.

MIKE, WILLIAMS

SUPERVISOR, DISTRICT IF

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

Title

748-1471

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.