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

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

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

JUN 26 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.	30-015-26983
Address 105 SOUTH 4th STREET, ARTESIA, NM 88210			
Reason(s) for Filing (Check proper box)		<input type="checkbox"/> Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Well producing thru LACT unit located	
Recompletion	<input type="checkbox"/>	Hill View AHE Fed. #2, Unit G, Sec.23-	
Change in Operator	<input type="checkbox"/>	T20S-R24E.	
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	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Hill View AHE Federal Com	12	South Dagger Draw U/Penn	State, Federal or Fee	NM 82641
Location				
Unit Letter	I	1980	Feet From The	South
		Line and	660	Feet From The
		East	Line	
Section	23	Township	20S	Range
		24E	NMPM,	Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate	Address (Give address to which approved copy of this form is to be sent)	
Amoco Pipeline Co.	<input type="checkbox"/>	502 N. West Avenue, Levelland, TX 79336	
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas	Address (Give address to which approved copy of this form is to be sent)	
Yates Petroleum Corporation	<input type="checkbox"/>	105 South 4th St., Artesia, NM 88210	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	G	23	20S
			Rge.
			24E
Is gas actually connected?	When ?	6-11-92	
Yes			

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-15-92	6-23-92		8160'		8000'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3630' GR	Canyon		7588'		7761'			
Perforations					Depth Casing Shoe			
7588-7743'					8160'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
14-3/4"	9-5/8"	1058'	1000 sx
8-3/4"	7"	8160'	1750 sx
	2-7/8"	7761'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

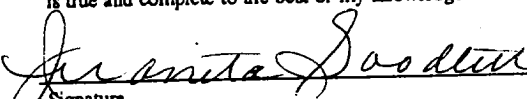
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6-11-92	6-23-92	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	160	160	2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
1137	291	846	500

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 - PRODUCTION SUPVR.
Printed Name
6-24-92
Date
(505) 748-1471
Telephone No.

OIL CONSERVATION DIVISION

JUL 29 1992

Date Approved _____
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.