

Submit 5 Copies  
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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator YATES PETROLEUM CORPORATION		AUG 30 1993		Well API No. 30-015-27053	
Address 105 South 4th St., Artesia, NM 88210					
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> WELL PRODUCING THROUGH LACT LOCATED AT ROSS Change in Operator <input type="checkbox"/> EG FEDERAL COM #2 BATTERY, NWNE OF SECTION Change in Transporter of: 19-T19S-R25E, EDDY CO., NEW MEXICO #104 Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Last Appr.					
If change of operator give name and address of previous operator					

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ross EG Federal Com	Well No. 12	Pool Name, Including Formation North Dagger Draw Upper Penn	Kind of Lease State, Federal or Fee	Lease No. NM-0557142
Location Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East Line Section 19 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 Pipeline Company/ Amoco Pipeline Intercompany Trucking	Address (Give address to which approved copy of this form is to be sent) 502 N. West Ave. - Levelland, TX 79336					
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 So. 4th St. - Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 19	Twp. 19S	Rge. 25E	Is gas actually connected? yes	When? 8-25-93

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded RH 7-27-93 RT 7-30-93	Date Compl. Ready to Prod. 8-25-93		Total Depth 8275'		P.B.T.D. 8230'			
Elevations (DF, RKB, RT, GR, etc.) 3582' GR	Name of Producing Formation Canyon		Top Oil/Gas Pay 7792'		Tubing Depth 7688'			
Perforations 7792-7840'			Depth Casing Shoe 8275'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 26"	CASING & TUBING SIZE 20"		DEPTH SET 40'		SACKS CEMENT Cement to surface			
14-3/4"	9-5/8"		1077'		1300 sx - circulate			
8-3/4"	7"		8275'		1450 sx - circulate			
	2-7/8"		7688'					

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 8-25-93	Date of Test 8-30-93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 160	Casing Pressure 95	Choke Size comp + BR open
Actual Prod. During Test 316	Oil - Bbls. 206	Water - Bbls. 110	Gas- MCF 543

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  
Rusty Klein  
Printed Name  
August 30, 1993  
Date  
Production Clerk  
Title  
(505) 748-1471  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved  
AUG 31 1993

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.