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

State of New Mexico Energy, Minerals and Natural Resources Deparament

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION MI AND NATURAL GAS

	<u> </u>	OTRA	NSPC	JK! OIL	HARM TAWN	UNAL GAG	Well AF	I No.			
YATES PETROLEUM CORPORATION						เฉฉว	ı	30-015-27067			
	111 2 6 1993										
ddress 105 South 4th St., A	Artesia	a, NM	8821	.0	. C. L - D						
eason(s) for Filing (Check proper box) ew Well Change in Transporter of: ecompletion Oil Dry Gas hange in Operator Casinghead Gas Condensate					WELL PRODUCING THRU LACT LOCATED AT SARA AHA COM #1, UNIT I, SECTION 11-T20S-R24E						
change of operator give name								· .			
d address of previous operator											
. DESCRIPTION OF WELL A	ND LEA	Well No.	Pool No	ame. Includin	g Formation		Kind o		Lea	se No.	
ease Name		8	Nort	h Dagge	r Draw U	Jpper Pen	n State, I	rederal or Fee	Fee		
Sara AHA Com			<u> </u>						.		
Unit Letter H	:198	30	Feet Fr	rom The No	orth_Line	and 660	Fe	et From The	East	Line	
Section 11 Township	20:	S	Range	24E	, NI	ирм, Е	iddy			County	
II. DESIGNATION OF TRANS	SPORTE	R OF O	IL AN	D NATU	Addres (Giv	e address to wh	ich approved	copy of this form	n is to be sen	ut)	
Name of Authorized Transporter of Oil					502 N West Ave Levelland, TX 79336						
Amoco Pipeline Interco	Address (Give address to which approved copy of this form is to be sent)										
Name of Authorized Transporter of Casing Yates Petroleum Corpor		or Dry		105 Sou	th Fourth	<u>l Street</u>	<u> – Artes</u>	ia, NM	88210		
If well produces oil or liquids,				Rge.	Is gas actually connected? When ?						
ive location of tanks.	I	T 11 20S 24E			yes			7-10-93			
f this production is commingled with that	from any ot	her lease or	pool, gi	ve comming!	ing order num	ber:					
V. COMPLETION DATA		Oil Wel		Gas Well	New Well		Deepen	Plug Back S	ame Res'v	Diff Res'v	
Designate Type of Completion	- (X)	X			X Total Depth	l		P.B.T.D.			
Date Spudded	Date Compl. Ready to Prod.				8200			8150			
RH 6-12-93 RT 6-13-93	7-10-93				Top Oil/Gas Pay			Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				7750			7600			
3607' GR Canyon								Depth Casing Shoe			
Perforations 7750-7804								82	.00		
TUBING, CASING AND					CEMENTING RECORD			SACKS CEMENT			
HOLE SIZE	C	CASING & TUBING SIZE			DEPTH SET						
26"		20"			40'			Cement to surface			
14-3/4"		9-5/8"			1075'			1520 sx - circulate			
8-3/4"		7" 2-7/8"			8200 ' 7600 '			1,740 34			
THE PROVINCE	CT FOR		7 1 VO 7 Y	~							
V. TEST DATA AND REQUE	21 LOK	total volum	e of load	d oil and mus	t be equal to a	r exceed top all	owable for th	is depth or be fo	r full 24 hou	7 ID- :	
T. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and Date First New Oil Run To Tank Date of Test					Producing N	Method (Flow, p	(c.) $Q - L - 93$				
7-10-93	7.	7-20-93			Pumping			Choke Size			
Length of Test	Tubing I	Tubing Pressure			Casing Pressure			open			
24 hours		220			Water - Bbls.			Gas- MCF			
Actual Prod. During Test	Oil - Bb	Oil - Bbls.			335			139			
436		101									
GAS WELL		4.00			Iphie Coed	ensate/MMCF	<u> </u>	Gravity of C	ondensate		
Actual Prod. Test - MCF/D	Length	Length of Test			DUIS. CONCENSE MATERIAL						
Testing Method (pitot, back pr.)	Tubing	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
esting intention (passe, section).											
VI. OPERATOR CERTIFICATE OF COMPLIANCE					OIL CONSERVATION DIVISION						
The residual 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.					Date Approved						
+ +1.)							At . Closum	N DW		
1 usty 7 Ilea					By ORIGINAL SIGNED BY						
Signature / Production Clerk					MIKE WILLIAMS SUPERVISOR, DISTRICT IT						
Printed Name					∏ Tit	le					
July 22, 1993			Telephon		·						
Date											

- 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.