

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

OIL CONSERVATION DIVISION

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

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. 30-015-27329
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	
MAY 28 1992	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Conoco AGK Federal Com	Well No. <u>14</u>	Formation South Dagger Draw U/Penn	Kind of Lease State, Federal or <u>Lease</u>	Lease No. NM 045275
Location				
Unit Letter <u>M</u>	<u>660</u>	Feet From The <u>South</u> Line and <u>660</u>	Feet From The <u>West</u> Line	
Section <u>15</u>	Township <u>20S</u>	Range <u>24E</u>	<u>NMPM</u>	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 Co. Amoco Pipeline Intercompany Trucking	Address (Give address to which approved copy of this form is to be sent) 502 N. West Avenue, Levelland, TX 79336
Name of Authorized Transporter of Casinghead Gas <input 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 <u>M</u> Sec. <u>15</u> Twp. <u>20</u> Rge. <u>24</u>
Is gas actually connected?	When? <u>5-7-93</u>

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 3-31-93	Date Compl. Ready to Prod. 5-24-93	Total Depth 7920'	P.B.T.D. 7872'					
Elevations (DF, RKB, RT, GR, etc.) 3699' GR	Name of Producing Formation Canyon	Top Oil/Gas Pay 7510'	Tubing Depth 7628'					
Perforations 7510-7616'	Depth Casing Shoe 7920'							

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"	1072'	1200 sx - circulated
8-3/4"	7"	7920'	1900 sx - circulated
	2-7/8"	7628'	

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.) <u>Post #D-2</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size <u>6-11-93</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF <u>comp &amp; BK</u>

GAS WELL

Actual Prod. Test - MCF/D 3210	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 150	Casing Pressure (Shut-in) 150	Choke Size open

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.

Rusty Klein  
Signature  
Rusty Klein  
Printed Name  
May 28, 1993  
Date  
Production Clerk  
(505) 748-1471  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 28 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.