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

State of New Mexico gy, Minerals and Natural Resources Departn

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

FEB 11 8 1994

DISTRICT III				
1000 Rio Brazos	Rd.	Artec.	NM	8741

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
Well A

	<u>-</u>	9 11 1/						Vell AP	l No.		į		
perator					30-015-27757								
YATES PETROLEUM CORPO	KALIUN			115	<u></u>								
ddress 105 South 4th St., Ar	tesia.	NM 8	8210										
eason(s) for Filing (Check proper box)			-		1325	(Please expla							
eason(s) for Pilling (Check proper day)	Change in Transporter of:			Well producing thru LACT located at Foster									
	Oil Dry Gas			AN #2, located Unit B, Sec. 1-T20S-R24E									
	Casinghead	Gas 🗌	Conde	sate									
change of operator give name													
d address of previous operator													
I. DESCRIPTION OF WELL A	ND LEA	SE	D1 N	Includin	g Formation	1547-	<u> </u>	Kind of	Lease	Le	ase No.		
ease Name	λ /	Well No.	Nor	th Dagg	er Draw	リクマノー Upper Pe	~ I	spage/17	edetal of Fee	ノ			
Mobil AOB	06_1		NOL	си вадь		- F F							
ocation	. 1980			- N	orth Line	and 198	30	Feet	t From The	East	Line		
Unit LetterG	:		_ Feel P	rom the	Line	4.00					_		
Section 1 Township	20S		Range	24E	, NM	IPM,			E	ddy	County		
<u> </u>													
II. DESIGNATION OF TRANS	SPORTE	R OF C	IL AN	ID NATUI	RAL GAS		liish an		conv of this fo	rm is to be se	nt)		
C to the design of the company of th		OF COLUC	nsate			address to w	пи ст а р	proveu t		TrY 7	9336		
Amoco Pipeline - Ull .	Amoco Pipeline - Ull lender Dept.				502 Nor	th West	Ave	nroved	com of this fo	rm is to be se	ent)		
Name of Authorized Transporter of Casing	nean Gas	X	or Dr	Gas	Address (GIN	e adaress to wath 4th	St	Arte	esia. NM	88210			
Yates Petroleum Corpor	<u>ration</u>		lm	- Bas	Is gas actually		<i></i>	When					
If well produces oil or liquids,	Unit	Sec.	Twp.	1 24	YES	,		 	2-22-94				
give location of tanks.	B					ber:							
f this production is commingled with that f	rom any ou	ici icasc O	. pooi, g	,	0								
V. COMPLETION DATA		Oil We	:11	Gas Well	New Well	Workover	D	eepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	i X	i		X	L	_L_				_L		
Date Spudded	Date Com	pl. Ready	to Prod.		Total Depth				P.B.T.D.	222 t			
1-23-94	2-	-24-94	·		8264'			8223					
Elevations (DF, RKB, RT, GR, etc.)	Name of I	roducing	Formati	on	Top Oil/Gas Pay			Tubing Depth 7802					
3603' GR	Canyon			7718'				Depth Casing Shoe					
Perforations										8264¹			
7718-7780'				17. A.M.	CEMENT	NG PECO	RD						
		TUBING, CASING AND CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT						
HOLE SIZE	C/			i SIZE	40'			Redi-Mix to surface					
26"	20" 9-5/8"		1075'			400 sx - circulate							
14-3/4"	 	9-3/6		8264'			140	1400 sx - circulate					
8-3/4"		2-7/8	311		7802'			*DV tool @6010'					
V. TEST DATA AND REQUE	ST FOR		TI A TOT	E						e e.11 24 h.	nare)		
V. TEST DATA AND REQUE OIL WELL (Test must be after	recovery of	total volu	me of loc	nd oil and mu	st be equal to c	or exceed top a	illowab	le for th	is depin or be	Jor Jul 24 110	1 I D - 2		
Date First New Oil Run To Tank	Date of 7	Date of Test		Linguiching interned (1 12)			4-8-94						
2-22-94	2	2-24-94		Pumping			Choke Size Lamp & BK						
Length of Test		Tubing Pressure		Casing Pres	ssure 160			2"					
24 hrs	165					Gas- MCF							
Actual Prod. During Test	al Prod. During Test Oil - Bbls.			Water - Bbls.			263						
531		221				310							
GAS WELL					-150	AAACT			Gravity of	Condensate			
Actual Prod. Test - MCF/D		of Test			Bbls. Cond	lensate/MMCF	-		Clarity of				
	Length (1								
					Casing Pro	course (Shut-in	7		Choke 512	.6			
Testing Method (pitot, back pr.)		Pressure (Shut-in)		Casing Pre	ssure (Shut-in)		Choke Siz	,c			
	Tubing				Casing Pre								
VI. OPERATOR CERTIFI	Tubing CATE (OF CO	MTLI	ANCE	Casing Pre			ER\			ION		
VI. OPERATOR CERTIFIES and report that the rules and report to the rules are rules and report to the rules and report to the rules and report to the rules are rules are rules and report to the rules are	Tubing CATE (OF COI	WILI enservation	ON	Casing Pre			ER\	/ATION	I DIVIS			
VI. OPERATOR CERTIFI I hereby certify that the rules and reg Division have been complied with at	Tubing CATE (gulations of and that the in	OF COI	MILI mservati	ON		OIL CO	SNC		/ATION	DIVIS 2 8 1994			
VI. OPERATOR CERTIFIED AND THE SAID THE	Tubing CATE (gulations of and that the in	OF COI	MILI mservati	ON		OIL CO	SNC		/ATION	DIVIS 2 8 1994			
VI. OPERATOR CERTIFI I hereby certify that the rules and reg Division have been complied with ar is true and complete to the best of m	Tubing CATE (gulations of and that the in any knowledge	OF COI the Oil Co nformation e and belie	MILI mservati	ON	Da	OIL CO	SNC		/ATION	DIVIS 2 8 1994			
VI. OPERATOR CERTIFICATION OF THE PROPERTY OF	Tubing CATE (gulations of and that the in any knowledge	OF COI the Oil Co nformation e and belie	MILI mservati	ON		OIL CO	SNC		/ATION	DIVIS 2 8 1994			
VI. OPERATOR CERTIFIED I hereby certify that the rules and regulation have been complied with an is true and complete to the best of medical complete.	CATE (gulations of and that the in the party knowledge)	OF COI the Oil Co information e and belie	MPLI mservati n given a ef.	on bove	Da	OIL CO	SNC		/ATION	DIVIS 2 8 1994			
VI. OPERATOR CERTIFICATION OF THE PROPERTY OF	CATE (gulations of and that the in the party knowledge)	or column the Oil Conformation e and believed the column terms of	MILI mservatin given a ef.	bove	Da	OIL CO	SNC		/ATION	DIVIS 2 8 1994			
VI. OPERATOR CERTIFICATION OF CERTIFICAT	CATE (gulations of and that the in the party knowledge)	OF COI the Oil Co information e and belie	MILI mservatin given a ef.	rvisor	Da	OIL CO	SNC		/ATION	DIVIS 2 8 1994			

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.