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PRODUCTION OFFICE	
OPERATOR	<u>3</u>

NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico

October 22, 1964

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Harvey E. Yates

Hondo-Singer 90"

Well No. 1

in SE

1/4 NW 1/4

(Company or Operator)

(Lease)

F

Sec. 18

T. 20S

R. 27E

NMPM,

Wildcat

Pool

Unit Letter

Re-entry

County. Date Spudded 7-9-64

Date Drilling Completed 7-31-64

Elevation 3311 G.A.L.

Total Depth 10,399

PBTD

10,246

Top Oil/Gas Pay 8774

Name of Prod. Form. Morrow

PRODUCING INTERVAL -

Perforations

Open Hole

Depth

Casing Shoe

Depth

Tubing

10,112 w/

packer

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): bbls. oil, bbls water in hrs, min. Size Choke

GAS WELL TEST -

Natural Prod. Test: 35,000 MCF/Day; Hours flowed 3 Choke Size 3/4

Method of Testing (pitot, back pressure, etc.): Critical Flow Brover

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

Casing Press. Tubing Press. Date first new oil run to tanks

Oil Transporter

Gas Transporter

RECEIVED

OCT 27 1964

O. C. C.

ARTESIA, OFFICE

Remarks: Shut in gas well.

NOV 25 1964

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved NOV 25 1964, 19

Harvey E. Yates

(Company or Operator)

By:

(Signature)

Title

Send Communications regarding well to:

Name

Harvey E. Yates

Address 305 Carper Bldg., Artesia, N.M.

OIL CONSERVATION COMMISSION

By: ML Armstrong

Title Oil and Gas Inspector