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

State of New Mexico nergy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

SUPERVISOR, DISTRICT II

	OILC	TIADE	TIC A LY I	2000	•			D.	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Con	to Fa N	P.O. Box	ico 87504-2088		MELEIV	ピレ		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			i	E AND AUTHORIZ	ATION	JUN 30	1003		
TO TRANSPORT OIL AND NATURAL O						Well API No.			
Operator YATES PETROLEUM COI		30-015-10728							
Address 105 South 4th St., A	Artesia. NM	88210							
Reason(s) for Filing (Check proper box)				Other (Please explain	n)				
New Well Re-entry			r of:						
Recompletion		Dry Gas Condensa	🖯						
Change in Operator	Casinghead Gas	Concensa		<u></u>					
If change of operator give name and address of previous operator	<u> </u>		1. /	10	0			•	
II. DESCRIPTION OF WELL A	AND LEASE	In		aun 4/ Penn	Kind o	T eace	Le	ase No.	
Lease Name	Well No.			g Formation/	edera Dor Fee NM-76944				
Pan Am Pardue ALZ Fed	Com 1		lildcat	Morrow				<u> </u>	
Location	14.60		: Sc	outh times 135	50 E	t From The _	West	Line	
Unit Letter N	:	Feet From	m The	outh Line and 135					
Section 27 Township	21S	Range	24E	, NMPM,	Eddy			County	
III. DESIGNATION OF TRANS	SPORTER OF O	L AND	NATUI	RAL GAS	ich approved	copy of this fo	orm is to be ser	nt)	
Name of Authorized Transporter of Oil	Name of Authorized Transporter of Oil O'Condensate				Address (Give address to which approved copy of this form is to be sent) 502 N. West Ave Levelland, TX 79336				
Amoco Pipeline Interco	orporate Trucking shead Gas X or Dry Gas			Address (Cine address to wh	copy of this form is to be sent)				
Name of Authorized Transporter of Casing Yates Petroleum Corpor	ation			105 South Fourt	t - Artesia, NM 88210				
If well produces oil or liquids,	Unit Sec.	Twp.		is gas actually connected?	When	?	•		
give location of tanks.	N 27	21S	24E	No		·			
If this production is commingled with that i	from any other lease or	pool, give	comming	ing order number:					
IV. COMPLETION DATA				New Well Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	Oil Well - (X) X	,	as Well	Re-entry	200	· · · · · ·	İ	1	
	Date Compl. Ready to	Prod.		Total Depth	<u> </u>	P.B.T.D.			
Date Spudded Re-entry 4-27-93	6-11-93			10340'	8110'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay	Tubing Depth				
4060' GR	Canyon			7999'		7758 Depth Casing Shoe			
Perforations						1034	-		
7999-8071'				CENTENIC DECOR	<u>n</u>	1 1054	<u> </u>		
	TUBING, CASING AND CASING & TUBING SIZE			DEPTH SET	SACKS CEMENT				
HOLE SIZE 17-1/2"	13-3/8'	UBING S	IZE	280'	In place Patto-2				
12-1/4"	8-5/8			2790 '	In place 8-1-13				
7-7/8"	5-1/2"			10340'	680 sacks compleme				
	2-7/8	" tub	ing	7758		1		/	
V. TEST DATA AND REQUES	ST FOR ALLOW	ABLE	وروس امسم ان	he equal to or exceed top allo	owable for thi	s depth or be	for full 24 hou	rs.)	
OIL WELL (Test must be after to Date First New Oil Run To Tank	Date of Test			be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)					
6-11-93	6-14-93			Pumping	Choke Size				
Length of Test	Tubing Pressure			Casing Pressure	Choke Size				
24 hours				Water - Bbls.		Gas- MCF			
Actual Prod. During Test	Oil - Bbls.			1533		40	00		
1765	232			1000		. · •			
GAS WELL				Bbls. Condensate/MMCF		Gravity of	Condensate	<u> </u>	
Actual Prod. Test - MCF/D	Length of Test			Duis. Condensate/1711/101					
Testing Method (pitot, back pr.)	Tubing Pressure (Sh	ut-in)		Casing Pressure (Shut-in)		Choke Size			
	GAME OF CO.	TOT TAR	VICE	1				<u> </u>	
VI. OPERATOR CERTIFIC	LATE OF COM	LT LLAN ervation	ACT:	OIL CO	NSERV				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					HII	JUL 2 3 1993			
is true and complete to the best of my knowledge and belief.				Date Approve	ed				
$()$ $-\nu_1$									
4 usty flen				By ORIGINAL SIGNED BY MIKE WILLIAMS					
Signature /		0.7		11	WHYE!	WILLIAMS	3		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

(505)

Signature Rusty

Date

Printed Name

June 28,

1993

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

All sections of this form must be filled out for allowable on new and recompleted wells.

Production Clerk

Title

748-1471

Telephone No.

- 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.