	NO, OF COPIES ACCEIVED 5 DISTINUUTION 5 SANTA FE 7 FILE 7 U.S.G.S. 5 LAND OFFICE	REQUEST	CONSERVATION COPSISION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Poin C+104 Superscrifts Old C-104 and C+1 Effective 1-1-65 GAS	
	TRANSPORTER OIL /	- · ·	RECEIVED		
1.	OPERATOR / PROBATION OFFICE	-	OCT 27 1976		
	Yates Petroleum Corporation				
	Address ARTEBIA, OFFICE				
	207 South 4th Reason(s) for filing (Check proper box, New Well Recompletion Change in Ownership	Street - Artesia, NM / Change in Transporter of: Oil Dry Go Casinghead Gas Conde	Other (Please explain)		
	If change of ownership give name and address of previous owner				
11	DESCRIPTION OF WELL AND	IFASE			
	Lesse Name William "BC"	Well No. Pool Name, Including F 3 Burton-Flat		al or Feo Fed	
	Location				
	Unit Letter H ; 19	80 Foot From The North Lin	ne and660 Feet From	The Fast	
	Line of Section 17 Tow	waship 20S Range	29E , NMPM, Ed	dy County	
11.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro		
	Navajo Crude O	<u>il Purchasing Compan</u> singhead Gas 💟 or Dry Gas 🔂	Address (Give address to which appro	Artesia, Nm 88210 oved copy of this form is to be sent)	
	El Paso Natura	l Gas Company	P. O. Box 1384 - Ja	1, New Mexico 88252	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. H 17 20S 29E		10-22-76	
	If this production is commingled with				
v.	COMPLETION DATA Designate Type of Completic	on - (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	12-21-75	2-17-76	11970 Top Oil/Gas Pay	11920' Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.) 3302 GR	Name of Producing Formation MOTTOW	11823'	11809'	
	Perforations			Depth Casing Shoe 11920'	
	11823-11867 TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17½"	<u>13-3/8"</u> 8-5/8"	600'	600	
	<u>12¹/</u> 7-7/8"	55	11965'	795	
		2-3/8"	11809'		
v .	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this di	after recovery of total volume of load oil epith or be for full 24 hours)	and must be equal to or exceed top aliou	
	OIL WEIL Date First New Oil Run To Tanks	Date of Test	Freducing Mothed (Flow, pump, gas l	ijt, etc.)	
-	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Lengin di ival				
	Actual Pred. During Test	Oil-Bble.	Water-Bbls.	Gas - MCF	
				1 - C - HK - HK	
	GAS WELL			10	
	Actual Fred. Test-MCF/D	Length of Test 2 Hr.	Bbls. Condensale/MMCF TSTM	Gravity of Condenacte	
-	3760 Testing Mothed (pitol, back pr.)	Z FIL . Tubing Processie (Shui-14)	Casing Preasure (Shut-in)	Choke Size	
	Back Pressure	3718	Packer	1/2"	
А.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION		
	Considering have been complied w	regulations of the Oil Conservation with and that the information given		APPROVED Q Susset	
	above is true and complete to the	beat of my knowledge and belief.	11 UT Colored and the second	UT	
	~ 1	/ 、	TITLE <u>SUPERVISOR</u> , DISTRICT. II This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly diffied or deepenet well, this form must be accompanied by a tabulation of the deviation teste taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allows able on new and recompleted walls.		
	111- 1	1			
	Inshul to	Marian			
		inson-Geol. Secty			
	(11)	ile)			
	10-26-76		Fill out only Soutions I, H, HI, and VI for changes of owner well name or number, or transporter, or other such change of condition		
	(D)	at e)			