

DISTRIBUTION		5
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PROBATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
**RECEIVED**

Form C-104  
Supersedes OIL C-101 and C-102  
Effective 1-1-65

JUL 11 1977

Operator Yates Petroleum Corporation		O. C. C. ARTESIA, OFFICE
Address 207 South 4th Street - Artesia, NM 88210		
Reason(s) for filing (check proper box)		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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner R-5609 1-1-78

I. DESCRIPTION OF WELL AND LEASE		<u>Little Boy Canyon - Atoka</u>	
Lessee Name Federal HQ	Well No. 1	Pool Name, Including Formation <u>Willcox - Atoka</u>	Kind of Lease NM 21012 State, Federal or <del>Lease</del> Federal
Location Unit Letter <u>N</u> : <u>990</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>5</u> Township <u>21S</u> Range <u>22E</u> , NMPM, <u>Eddy</u> County			

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Navajo Crude Oil Purchasing Company	No. Freeman Ave. - Artesia, NM 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Pipeline Company	P. O. Box 1384 - Jal, NM 88252			
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 5	Twp. 21S	Rge. 22E
	Is gas actually connected?		When	
	Yes		7-26-78	

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA				
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover
		X	X	
Date Spudded 4-13-77	Date Compl. Ready to Prod. 6-16-77	Total Depth 8679	P.B.T.D. 8198	
Elevations (DF, RKB, RT, GR, etc.) 4314'	Name of Producing Formation Atoka	Top Oil/Gas Pay 7967	Tubing Depth 7918	
Perforations 7967-78 8076-90			Depth Casing Shoe 8240'	
TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
15 1/2"	13-3/8"	30'	3 yds Ready-mix	
12 1/4"	8-5/8"	1100'	775	
7-7/8"	5 1/2"	8240'	405	
	2-3/8"	7918'		

IV. 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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL			
Actual Prod. Test - MCF/D 400	Length of Test 24	Bbls. Condensate/MMCF	Gravity of Condensate 1.22
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 2533#	Casing Pressure (Shut-in) Pkr	Choke Size 1/2"

V. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		JUL 29 1977	
Christine Tomlinson-Geol. Secty		APPROVED	
(Signature)		BY <u>W. A. Gussert</u>	
(Title)		TITLE <u>SUPERVISOR, DISTRICT II</u>	
7-8-77		This form is to be filed in compliance with RULE 1104.	
(Date)		If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
		All sections of this form must be filled out completely for allowable on new and re-completed wells.	
		Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	