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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROBATION OFFICE	

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

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

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OCT 13 1978

Operator
Yates Petroleum Corporation

Address
207 South 4th Street - Artesia N.M. 88210

O.C.C.
ARTESIA, OFFICE

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"/>
Change In Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		R-5876	
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Cities JH State	1	Permian Penn	State, Federal or Fee State
Location		Lease No.	
Unit Letter E ; 2205 Feet From The North Line and 660 Feet From The West		L-4995	
Line of Section 36 Township 21S Range 21E, NMPM, Eddy County			

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Company	North Freeman Ave. - Artesia N.M. 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 Gas Pipeline Company	P. O. Box 1384 - Jal N.M. 88252
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit E Sec. 36 Twp. 21S Rge. 21E	Yes Approx. 2-weeks

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

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
	X X
Date Spudded	Date Compl. Ready to Prod.
3-18-78	7-28-78
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation
4612' GR.	Cisco-Wolfcamp
Perforations	Top Oil/Gas Pay
5851-6173'	5851
	Tubing Depth
	6149
	Depth Casing Shoe
	8748

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8"	111	100
12 1/4	8 5/8"	1557	1190
7 7/8	5 1/2"	8748'	560
	2 3/8"	6149	

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	Length of Test
1400	24
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)
Back Pressure	1560
Bbls. Condensate/MMCF	Gravity of Condensate
TSTM	
Casing Pressure (Shut-in)	Choke Size
Packer	1/2"

CERTIFICATE OF COMPLIANCE

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.

Eddie Mahfood, Engineer
October 13, 1978

OIL CONSERVATION COMMISSION

APPROVED DEC 12 1978
BY W. A. Gussert
TITLE SUPERVISOR, DISTRICT II

This form is to be filled in compliance with RULE 1104.
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 recompleted 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.