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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED Form C-104
Revised 1-1-39
See Instructions
at Bottom of Page

FEB 14 1991

O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator YATES PETROLEUM CORPORATION	Well API No. 30-015-24478
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lake Shore XH Federal Com	Well No. 1	Pool Name, Including Formation Unders. Atoka	Kind of Lease State, Federal or R/Le	Lease No. NM 3606
Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 11 Township 21S Range 26E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Navajo Refining Co.	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Artesia, NM 88210				
Name of Authorized Transporter of Casinghead Gas Gas Company of New Mexico	<input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 26400, Albuquerque, NM 87125				
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 11	Twp. 21S	Rge. 26E	Is gas actually connected? Yes	When? RECONNECTED 2-13-91

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

IV. 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		X
Date Spudded RECOMPLETION 1-29-91	Date Compl. Ready to Prod. 2-9-91	Total Depth 11301'	P.B.T.D. 10600'					
Elevations (DF, RKB, RT, GR, etc.) 3184' GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 10484'	Tubing Depth 10400'					
Perforations 10484-10502'	Depth Casing Shoe 11300'							

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix (in place)
17 1/2"	13-3/8"	450'	600 (in place)
12 1/4"	9-5/8"	2663'	1870 (in place)
7-7/8"	5 1/2"	11300'	850 (in place)

V. TEST DATA AND REQUEST FOR ALLOWABLE /2-7/8" @10400' /

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Post ID-2 2-22-91
Length of Test	Tubing Pressure	Casing Pressure	Choke Size p + A max comp. Atoka
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF Post ID-2 8-16-91 when + put in. P.H.C. w/ Atoka

GAS WELL

Actual Prod. Test - MCF/D 1400	Length of Test 24	Bbls. Condensate/MMCF -	Gravity of Condensate P.H.C. w/ Atoka
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 180	Casing Pressure (Shut-in) Pkr	Choke Size 32/64"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature
Juanita Goodlett - Production Supvr.
Printed Name
2-13-91
Date
Title
(505) 748-1471
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 22 1991

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 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.