Lease Name Well No. Pool Name, Including Formation Mill of Deater Chamois AKE Federal Com 1 Undesignated Wolfcamp /State, Federal of Fee NM 04 Location 1 Undesignated Wolfcamp 1980 Feet From The North Line and 1980 Feet From The East Section 33 Township 20S Range 29E , NMPM, Eddy III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Iddress (Give address to which approved copy of this form is to be see	ease No. 473817 Line
P.O. Draver DD, Artesa, NM 88210 Santa Fe, New Mexico 87504-2088 DISTRICT III INCOMENDATION INCOMENDATION REQUEST FOR ALLOWABLE AND AUTHORIZATION INCOMENDATION IN TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. YATES PETROLEUM CORPORATION 30-015-26923 Address 105 South 4th St., Artesia, NM 88210 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Image in Transporter of: Recompletion Oil In the charge in Operator Change in Condensate It change of operator give name and address of previous operator Image in Condensate It change of operator give name and address of previous operator Image in Condensate It change in AKE Federal Com Image in Undesignated Wolfcamp Icoation Image in 33 Township Section 33 Township Section 33 Township Section 33 Township OS Range 29E NMPM, Eddy Eddy	473817
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Section 33 Township 205 Range 201 INNERMI III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	County
Name of Authorized Transporter of Oil or Condensate	ni)
Navajo Refining Co.	
Name of Authonized Hanspolet of Carbon 105 South 4th St., Artesia, NM 88210	
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When 1 give location of tanks. G 33 20 29 YES 9-11-92	
If this production is commingled with that from any other lease or pool, give commingling order number:	
IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v	Diff Res'v
Designate Type of Completion - (X) X X Date Studded Date Compl. Ready to Prod. Total Depth	
Date Spudded 12247'	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation 9492'	
3621' GR Wolfcamp 9528 9432 Perforations 12220'	
0529 06001	
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEM	IENT
30''	ulated
173'' $13-3/0$ 1000 cm circu	
$12\frac{1}{2}$ 8-5/8 12220 1485 sx	
7-7/8" 7-7/8" 0 9492'/	
and must be equal to or exceed top unomable for this depiner of load oil and must be equal to or exceed top unomable for this depiner of each	urs.)
OIL WELL (Test must be after recovery of four volume of rous of and and the four of rous of and the four of	
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 Bbls. Condensate/MMCF Clavity of Condensate/	
750 24 hrs Code Decay (Shut in) Choke Size	
Testing Method (pitor, back pr.)Tubing Pressure (Shut-in)Casing Pressure (shut-in)Back Pressure440PKR17/64''	
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. Date Approved	ON
Aland Doudlet By	·
Signature Sugniture Goodlett Production Supvr.	
Printed Name Title Title 11-13-92 (505) 748-1471 Title	
Date Telephone No.	

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

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.