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ARTESIA, N.M.

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
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STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

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SANTA FE	<input checked="" type="checkbox"/>
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LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

**REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Operator Harvey E. Yates Company	
Address P. O. Box 1933, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
Effective November 1, 1986	

If change of ownership give name and address of previous owner: Marathon Oil Company, P. O. Box 2409, Hobbs, New Mexico 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name Forehand	Well No. 2	Pool Name, including Formation Forehand Ranch Delaware	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter <u>K</u> ; <u>1980</u> Feet From The <u>West</u> Line and <u>1880</u> Feet From The <u>South</u>					
Line of Section <u>15</u> Township <u>23S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Navajo Refining Company	P. O. Box 159, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <u>K</u>	Sec. <u>15</u>
	Twp. <u>23S</u>	Rge. <u>27E</u>
Is gas actually connected?		When
<u>No</u>		<u>Part ID-3</u> <u>11-28-86</u> <u>chg. ap</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Layne Collins
(Signature)

Production Analyst

(Title)

November 24, 1986

(Date)

OIL CONSERVATION DIVISION

NOV 26 1986

APPROVED _____, 19 _____

BY _____ Original Signed By

Les A. Clements

TITLE _____ Supervisor District II

This form is to be filed 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

