Submit 5 Copies
Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions
RECEIVED at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

MAY 2 1 1992

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DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 O. C. D. DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator 30-015-26932 YATES PETROLEUM CORPORATION 105 SOUTH 4th STREET, ARTESIA, NM 88210 Address Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: EFFECTIVE JUNE 1, 1992 New Well X Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Pool Name, Including Formation West Sand Dunes Morrow Well No. State, Federal or Fee V-120 Lease Name Atoka Medano VA State Location 1980 Feet From The North Line and 660 _ Feet From The _West_ F. Unit Letter _ County Eddy , NMPM, 31E Range Township 23S Enron Oil Trading & Transportation: 1102 PO Box 1188 House of Authorized Transportation: 1102 III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas 105 South 4th St., Artesia, NM 88210 Yates Petroleum Corporation When? Is gas actually connected? Twp. Rge. I Sec. If well produces oil or liquids, Unit 11-16-91 Yes 31 give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Res'v Diff Res'v New Well | Workover Deepen Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE V. TEST DATA AND REQUEST FOR ALLOWABLE (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.) Producing Method (Flow, pump, gas lift, etc.) OIL WELL Date of Test Date First New Oil Run To Tank Choke Size Casing Pressure Tubing Pressure Length of Test Water - Bbls. Oil - Bbls. Actual Prod. During Test GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test - MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Date Approved ____MAY 2 8 1992 is true and complete to the best of my knowledge and belief. ORIGINAL SIGNED BY JUANITA GOODLETT - PRODUCTION SUPVR. MIKE WILLIAMS SUPERVISOR, DISTRICT IT

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

(505)

Printed Name

Date

5-20-92

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

Title_

All sections of this form must be filled out for allowable on new and recompleted wells.

748-1471

Telephone No.

- 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.