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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

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

SEP 22 1993

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator YATES PETROLEUM CORPORATION	Well API No. 30-015-27323
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input 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 Medano VA State	Well No. 15	Pool Name, Including Formation Los Medanos Delaware	Kind of Lease <u>State</u> Federal or Fee	Lease No. V-120
Location Unit Letter B : 330 Feet From The North Line and 1980 Feet From The East Line Section 16 Township 23S Range 31E , NMPM , Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> EOTE Energy Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188 - Houston, TX 77521-1188					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 105 So. 4th St. - Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 16	Twp. 23S	Rge. 31E	Is gas actually connected? yes	When? 8-22-93

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded BH 7-6-93	Date Compl. Ready to Prod. 8-22-93		Total Depth 8149'		P.B.T.D. 8103'			
Elevations (DF, RKB, RT, GR, etc.) 3352' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 7106'		Tubing Depth 8039'			
Perforations 7106-8030'					Depth Casing Shoe 8149'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		40'		Cement to surface			
17-1/2"	13-3/8"		504'		475 sx - circulate			
11"	8-5/8"		4042'		1750 sx - circulate			
7-7/8"	5-1/2"		8149'		1000 sx			

V. TEST DATA AND REQUEST FOR ALLOWABLE 2-7/8" @ 8039'

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.)		Producing Method (Flow, pump, gas lift, etc.) Pumping	
Date First New Oil Run To Tank 8-22-93	Date of Test 9-11-93	Choke Size 10-12-93	
Length of Test 24 hours	Tubing Pressure 75	Casing Pressure 75	Gas-MCF 56
Actual Prod. During Test 546	Oil - Bbls. 105	Water - Bbls. 441	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 Rusty Klein
Printed Name **Rusty Klein** Title **Production Clerk**
Date **September 17, 1993** Telephone No. **(505) 748-1471**

OIL CONSERVATION DIVISION

Date Approved **SEP 29 1993**

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.