STATE OF NEW MEXICO MINICONI S DEPARTMENT

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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-1-78

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PAGNATION OFFICE Operator Yates Petroleum Corporation Addiess 207 South 4th St., Artesia, NM 88210 Reason(s) for filing (Check proper box) Other (Please explain) X Change in Transporter of: New Well Dry Gas Oil Recompletion Condensale Change in Ownership If change of ownership give name and address of previous owner ____ DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation NM-13956 State, Federal or Fee Federal Kinbeto "RG" Federal 1 Und. Gallup Location Feet From The North Line and 1850 Feet From The East 980 Unit Letter B County 10W , NMPM, San Juan 23N Range T. waship Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil X or Condensate P. O. Box 26251, Albuquerque, NM 87125

Address (Give address to which approved copy of this form is to be sent) Plateau Incorporated Name of Authorized Transporter of Casinghead Gas or Dry Gas When is gas actually connected? Rge. Unit Twp. If well produces oil or liquida, give location of tanks. 10w 8 23n No R this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Plug Back Same Res'v. Dill. Res Workover Gas Well New Well Deepen Designate Type of Completion - (X) X X P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded 5520' 4278' 8-30-81 6-26-81 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 4232 42001 6492' GR Gallup Depth Casing Shoe Perforations <u>5520'</u> 4232-4273 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 200 8-5/8" 12-1/4" 222! 5-1/2" 910 5520' 7-7/8" 2-3/8" 4200' CEST DATA AND REQUEST FOR ALLOWABLE IL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allable for this depth or be for full 24 hours) Date First New Oil Run To Tanks Pumping 8-30-81 8-28-81 Choke Size Casina Pressure Length of Test Tubing Pressure 20# 20# 24 hrs Ggs - MCI Oil-Bble Actual Prod. During Test 15 2.2 23 nd - Sept Aug 1981 G/S WELL Gravity of Condensate Bbis. Length of Test Actual Prod. Test-MCF/D COM. $C \cap N$ Choke Size 的智力3) Tubing Presewe (Shut-in) Testing Method (pitot, back pr.) SEP4-ERTIFICATE OF COMPLIANCE APPROVED. hereby certify that the rules and regulations of the Oil Conservation Original Signed by FRANK T. CHAVEZ

sivision have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.

-0 UL (Signature)

Secretary Engineering (Title)

9-1-81

(Date)

BY. SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104,

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviations taken on the well in accordance with NULE 111.

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

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi Separate Forms C-104 must be filed for each pool in multi