

DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		1
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

I. Operator Minel, Inc.
Address 457-C Washington, SE, Albuquerque, NM 87108
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner Harold A. Yaffee- Geoelectric, Inc. Agent
103 No. Main, Aztec, NM 87410

II. DESCRIPTION OF WELL AND LEASE
Lease Name Yaffee Well No. 2 Pool Name, Including Formation Tapacito PC Kind of Lease Federal Lease No. SE080530
Location
Unit Letter J 1850 Feet From The East Line and 1850 Feet From The South
Line of Section 2 Township 25N Range 3W , NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
Plateau, Inc. Address (Give address to which approved copy of this form is to be sent)
Box 489, Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
El Paso Natural Gas Co. Address (Give address to which approved copy of this form is to be sent)
Box 1492, El Paso, TX 79978
If well produces oil or liquids, give location of tanks. Unit J Sec. 2 Twp. 25N Rge. 3W Is gas actually connected? Yes When 2-2-66

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)
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE 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)
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
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 Gravity of Condensate
Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

VI. CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
R. G. Scanlon (Signature)
R. G. Scanlon, Asst-Secy for Minel, Inc. (Title)
June 26, 1984 (Date)
OIL CONSERVATION COMMISSION
APPROVED JUN 27 1984, 19
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3
TITLE
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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completed wells.