

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-70

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GAS	<input checked="" type="checkbox"/>
OPERATION	
PRODUCTION OFFICE	
OPERATOR	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation ✓

Address
207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
RECEIVED
MAY 20 1982

Other (Please explain)

If change of ownership give name
and address of previous owner

O. C. D.
ARTESIA, OFFICE

DESCRIPTION OF WELL AND LEASE

Lease Name Smernoff NL State Com	Well No. 2	Pool Name, Including Formation Pecos Slope Abo	Kind of Lease State, Federal or Fee State	Lease No. LG563
Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line of Section 2 Township 5S Range 24E, NMPM, Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 2521, Houston, TX 77001		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. J 2 5s 24e	Is gas actually connected? Yes	When approx - 6 wks 12 22 82

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
		X	X					
Date Spudded 4-17-82	Date Compl. Ready to Prod. 5-14-82	Total Depth 4100'	P.B.T.D. 4041'					
Elevations (DF, RKB, RT, GR, etc.) 3930.5' GR	Name of Producing Formation Abo	Top Oil/Gas Pay 3569'	Tubing Depth 3625'					
Perforations 3569-3719'			Depth Casing Shoe 4085'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20"	40'	
12-1/4"	8-5/8"	835'	
7-7/8"	4-1/2"	4085'	
	2-3/8"	3625'	

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)

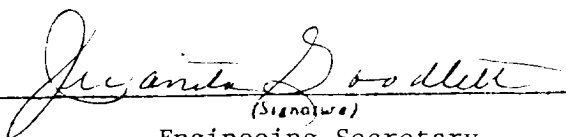
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water-Bble.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 267	Length of Test 4 hrs	Bble. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 240	Casing Pressure (Shut-in) Packer	Choke Size 1/2"

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)

Engineering Secretary

(Title)

5-17-82

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 5 1983, 19

BY Original Signed By

Leslie 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 conditions.

Separate Form C-104 must be filed for each pool in multiple completed wells.