

OIL CONSERVATION DIVISION
P. O. BOX 7000
SANTA FE, NEW MEXICO 87501Form C-104
REVISED 1-78

NOV 14 '88

O. C. D.
ARTESIA OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRICT OFFICE	
SANTA FE	
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	
OIL	
NATURAL GAS	
OPERATION	
PRODUCTION OFFICE	
OPERATOR	

YATES PETROLEUM CORPORATION

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

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Dry Gas ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Monaghan QY Federal	Well No. 12	Pool Name, including Formation Pecos Slope Abo	Kind of Lease State, Federal or Fee Federal	Lease No. NM-14983
Location Unit Letter <u>0</u> : <u>660</u> Feet From The <u>SOUTH</u> <u>North</u> Line and <u>1980</u> Feet From The <u>East</u>				
Line of Section <u>28</u> Township <u>5S</u> Range <u>24E</u> , NMPM, <u>Chaves</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 1188, Houston, TX 77001					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 28	Twp. 5s	Rge. 24e	Is gas actually connected? YES	When 11-9-88

If this production is commingled 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	Some Restr.	Diff. Restr.
		X	X					
Date Spudded 5-24-88	Date Compl. Ready to Prod. 6-17-88		Total Depth 4250'		P.D.T.D. 4202'			
Elevations (D.F., R.R.H., R.T., G.R., etc.) 4067.2' GR	Name of Producing Formation Abo		Top Oil/Gas Pay 3664'		Tubing Depth 3610'			
Perforations 3664-4026'					Depth Casing Shoe 4250'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
12-1/4"	9-5/8"	1200'	850
7-7/8"	4-1/2"	4250'	500
	2-3/8"	3610'	

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 758	Length of Test 24 hrs	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (split, back pr.) Back Pressure	Tubing Pressure (whut-in) 210	Casing Pressure (whut-in) PKR	Choke Size 3/8"

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.

Production Supervisor

11-11-88

OIL CONSERVATION DIVISION

APPROVED DEC 6 1988, 19BY Original Signed By

TITLE

This form is to be filed in compliance with RULE 1004.
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 condition. Separate Form C-104 must be filed for each pool in multiple