

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1930, Hobbs, NM 32240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brizos 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

DEC - 9 1992

O. C. D.
OFFICE

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

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REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator YATES PETROLEUM CORPORATION	Well API No. 30-005-62913
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Filaree AEL Federal Com	Well No. 3	Pool Name, Including Formation Pecos Slope Abo	Kind of Lease State, Federal or any	Lease No. NM 29623
Location				
Unit Letter E	1980	Feet From The North	Line and 660	Feet From The West
Section 33	Township 8S	Range 26E	NMPM,	Chaves
County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Navajo Refining Co.	☐ or Condensate ☒	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 Transwestern Pipeline Company	☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2521, Houston, TX 77001				
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 33	Twp. 8s	Rge. 26e	Is gas actually connected? Yes	When? 12-4-92

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res'v
		X	X					
Date Spudded 11-5-92	Date Compl. Ready to Prod. 11-23-92		Total Depth 5100'		P.B.T.D. 5056'			
Elevations (DF, RKB, RT, GR, etc.) 3792' GR	Name of Producing Formation Abo		Top Oil/Gas Pay 4631'		Tubing Depth 4580'			
Performances 4631-5018'					Depth Casing Shoe 5100'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		40'		Redi-Mix			
12 1/2"	8-5/8"		1100'		675 sx - circulated			
7-7/8"	4-1/2"		5100'		325 sx			
	2-3/8"		4580'					

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 Tank	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

Post ID-2
12-11-92
comp & BK

GAS WELL

Actual Prod. Test - MCF/D 1670	Length of Test 24 hrs	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 340	Casing Pressure (Shut-in) PKR	Choke Size 28/64"

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
Juanita Goodlett - Production Supvr.
Printed Name
Date
Title
(505) 748-1471
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 10 1992

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.