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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
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-110
Effective 1-1-65

RECEIVED

JUL 27 1971

Operator
Yates Petroleum Corporation

Address
O. G. C.
207 South 4th Street - Artesia, New Mexico 88210

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)
CASINGHEAD GAS MUST NOT BE FLARED AFTER 9-21-71 UNLESS AN EXCEPTION TO R-4073 IS OBTAINED
ep. 2-37-8-11-71

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Federal BW	Well No. 4	Pool Name, including Formation Eagle Creek S.A.	Kind of Lease M0219603-A	Lease No. Federal
Location Unit Letter M ; 330 Feet From The South Line and 990 Feet From The West				
Line of Section 22 Township 17S Range 25E , NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Scurlock Oil Company	Address (Give address to which approved copy of this form is to be sent) 412 Bldg. of Southwest Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	0 22 17S 25E No

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-7-71	Date Compl. Ready to Prod. 7-21-71	Total Depth 1521'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3542' GL	Name of Producing Formation San Andres	Top Oil/Gas Pay 1275'	Tubing Depth 1255'					
Perforations 1445, 1423, 1414, 1406, 1389½, 1382, 1374, 1362, 1351½, 1337, 1325, 1275, 1345½, 1357, 1367, 1386, 1402½, 1410, 1418, 1433						Casing Shoe 1521'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/8"	10 3/4" 32#	207'	75 sacks					
9 7/8"	7" 23#	1121'	525 sacks					
6 1/8"	4½") Tapered 11#)	506') 1521'	125 sacks					
	5½") 14#)	999')						

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 7-21-71	Date of Test 7-24-71	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 71	Oil-Bbls. 56	Water-Bbls. 15 BLW	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Eddie M. Mahfood
(Signature)
Eddie M. Mahfood - Engineer
(Title)
7-27-71
(Date)

OIL CONSERVATION COMMISSION
JUL 28 1971
APPROVED _____, 19____
BY *W.A. Gressett*
OIL AND GAS INSPECTOR
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 condition.
Separate Forms C-104 must be filed for each pool in multiply