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t	DISTRIBUTIO					
ı	SANTA FE	1				
Ì	FILE	1				
	U.S.G.S.	<u> </u>	<u> </u>			
Ī	LAND OFFICE	<u> </u>	ļ			
ı	TRANSPORTER	OIL	1/			
	TRANSFORTER	GAS				
	OPERATOR	/_	<u> </u>			
	PRORATION OF	<u> </u>	<u> </u>			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA	FE	/	i Ne	REQUEST F	OR ALL	OWABLE		•	sedes Old C-	104 and C-110
FILE		4	AND AUTHORIZATION TORTEAUSPERIT VILEAUM NATURAL GAS							
U.S.G.S.			AUTHORIZA	ATION TOUTEA	72HEKII	AITE VIEW IN	ATURAL G	45		
LAND O	OFFICE	, - 								
TRANSF	ORTER GAS	AUG 3 0 1971								
OPERA1		7				- -				
	TION OFFICE				1. C. C	<u> </u>			·····	 -
Operator					SIA, OF	FICE				
Y	ates Petro	oleum	Corporation	on						
Address	207 South 4	lth St	reet- Arte	sia. New M	4exic	ი⊸88210				İ
1) for filing (Check pr					Other (Please	explain)	m. N	OT BE	
New Well	√ √√	DPC (B 02)	Change in Tran	sporter of:	İ		5.AD 6.35	MINT N	-71	
Recomple			Oil	Dry Gas			LR -	DELON TO	R-4070	:
	nge in Ownership Casinghead Gas Condensati									
L						IS OBTA	INED			
If change	of ownership give ess of previous ow	name ner								
and addre	ess of previous on									
	PTION OF WEL	L AND L	EASE	Name Including Fo	rmation		Kind of Lease	NM 0219	3603	Lease No.
Lease No			Well No. Pool Name, merading			or Fee Fee	deral			
	ederal BZ			hagie ores						
Location	2	. 330	Earl Day D	East Line	. and 16	550	Feet From T	he Sout	th	
Unit L	_etterT	;			_					
Line	of Section 21	Town	nship 17S	Range 25	E	, NMPM,	Ed	ay ———		County
L										
II. DESIGN	ATION OF TRA	NSPORT	ER OF OIL ANI	NATURAL GA	S	(Give address t	o which approx	ed copy of this	form is to h	e sent)
Name of	Authorized Transpor	rter of Oil	or Conden	isate	Audiess	Bldg of				
I I	The Scurloc	CK OII	Company	or Dry Gas	Address	(Give address t	o which approx	ed copy of this	s form is to b	e sent)
Name of	Authorized Transpor	rter of Casi	ngnedd Gds	3. D., Gas						
			Unit Sec.	Twp. Rge.	Is gas ac	ctually connecte	d? Whe	n		
If well pr	roduces oil or liquid ation of tanks.	s, !	P 21	17S 25E		No				
	oduction is commi			no lease or pool	give com	mingling order	number:			
	ETION DATA	ngted with	that from any on	ici icuse oi pooi,						Diff. Donto
		1-4:	Oil We	ell Gas Well	New Well	l Workover	Deepen	Plug Back	Same Hes'v.	Diff. Res'v.
Desi	ignate Type of C	ompletion			X			P.B.T.D.		<u>i</u>
Date Spu	udded		Date Compl. Ready		Total De	•		1		
	3 - 6-71		8-23 Name of Producing	3-71		1542' /Gas Pay		1528 Tubing Dept	h	
Elevation	ns (DF, RKB, RT, C	· ·			1	95'		1276		
	3551' (بلخ	San And	ires	1.4	93		Depth Casin		<u></u>
Perforat	ions		1295-1509	9' - 20 sh	ots			1528'	1528'	
	· · · · · · · · · · ·		TUBI	NG, CASING, AND	CEMENTING RECORD					
	HOLE SIZE			TUBING SIZE		DEPTH SE		SA	CKS CEME	NT
<u> </u>	13 3/4"		10 3/4	" 32#		162'			sacks	
	9 7/8"			& 23#		1124'			sacks	
1	6 1/8"		4\2" 1.			509')	1528'	125	sacks	
			5½" 14	4#)		1007')		<u>i</u>		
V. TEST I	DATA AND REQ	UEST FO	OR ALLOWABLE	E (Test must be a	fter recove	ery of total volu for full 24 hours	me of load oil	and must be eq	jual to or exc	eed top allow
OIL WE	ELL		Date of Test	able for this de	Producti	ng Method (Flow	v, pump, gas li	(t, etc.)		
Date Fi	ret New Oil Run To	Tanks			1		mping			
	8-23-71		8-25-	71	Casing	Pressure	<u> </u>	Choke Size	· ·············	
Length	of Test								·	
Actual	Prod. During Test		Oil-Bbls.		Water - E	3bls.		Gas-MCF		
, Actual	43		28		11	7 BLW		TSTM	,	
GAS W	ELL							Ta		
	Prod. Test-MCF/D		Length of Test		Bbls. C	ondensate/MMC	F	Gravity of C	ondensate	
[Dengano Pakas	-(n)	Choke Size		
Testing	Method (pitot, back	pr.)	Tubing Pressure	Shut-in]	Casing	Pressure (Shut	<u></u>)	Choke Size		
<u> </u>				 	1		CONCECT	TION CON	ANAISSION	
VI. CERTI	CERTIFICATE OF COMPLIANCE							_	MUICCININ	
					APP	ROVED	AUG 3	119/1	, 1	9
~ 1.		omniled v	s and regulations of the Oil Conservation olied with and that the information given			1.1 A Same				
above i	above is true and complete to the best of my knowledge and					OIL AND GES INSPECTOR				
					TITL	.E	erem man w			
	0 ,-) 1	1 19 1				a ha dilad la	compliance "	with put =	1104.
	Colding his highly of				This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened					
	- COUNT	/Sian	ature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
			<i>V</i>	neer	tents	taken on the	well in acco	rdance with	RULE 111.	
	Eddie M.	die M. Mahfood - Engineer				All sections of this form must be filled out completely for allow-				

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