

DISTRIBUTION			
SANTA FE		1	
FILE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
PROBATION 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-1  
Effective 1-1-65

RECEIVED

DEC 3 1976

Operator Yates Petroleum Corporation		O. C. C.	
Address 207 South 4th Street - Artesia, NM 88210		ARTESIA, OFFICE	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/> Re Entry	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name  
and address of previous owner

R-5609 1-1-78

II. DESCRIPTION OF WELL AND LEASE

Riverside Atoka

Lease Name Holden "DE"	Well No. 1	Pool Name, Including Formation Wilbeat Atoka	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 12 Township 17S Range 26E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Navajo Crude Oil Purchasing Company	No. Freeman Ave - Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Transwestern Pipeline Company	P. O. Box 2521 - Houston, TX 77001	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 12
	Twp. 17S	Rge. 26E
	Is gas actually connected?	When
	Yes	12-2-76

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		X			
Date Spudded 11-9-73	Date Compl. Ready to Prod. 1-4-73	Total Depth OWTD 8600', OWDD 8746'		P.B.T.D. 8450'					
Elevations (DF, RKB, RT, GR, etc.) 3304' GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 8354'		Tubing Depth 8207'					
Perforations 8354-8376'				Depth Casing Shoe 8734'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
1 1/2"	12-3/4"		367'		400				
11"	8-5/8"		1446'		650				
7-7/8"	4 1/2"		8734'		400				

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 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 1155	Length of Test 24	Bbls. Condensate/MMCF 6.4	Gravity of Condensate 55.0
Testing Method (pilot, back pr.) Back Press.	Tubing Pressure (Shut-in) 2838	Casing Pressure (Shut-in) Sealed	Choke Size 11/64"

VI. 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.

Christine Tomlinson  
(Signature)

Christine Tomlinson - Geol. Secty.

12-2-76

(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 8 1976, 19

BY W. P. Gussert

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 condition.