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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

000 Rio Brazos Rd., Aztec, NM 87410	REQUI	EST FC	R A	LLC	OWABI	LE AND A	UTHORIZ	ATION					
ALOT									ell API No.				
YATES PETROLEUM CORPORATION							30-025-23379						
ddress 105 South 4th St.,	Artesia	, NM	882	210									
eason(s) for Filing (Check proper box)		Change in	Tmne	-orte	r of:	U Othe	r (Please explai	n)					
ecompletion	Oil		Dry C			Eff	ective D	ate: 2-	1-92				
hange in Operator	Casinghead				e 🗌								
change of operator give name d address of previous operator													
DESCRIPTION OF WELL	AND LEA	SE											
ease Name		Well No. Pool Name, Including							l Lease Federal or Fee	_	ase No.		
Lonestar AAI State		1	Ei	gh	t Mil€	e Draw P	ermo Penr	State	edelal of 1 cc	+ /			
ocation Unit LetterK	: 198	30	_ Feet	Fron	1 The <u>Sc</u>	outh Lin	e and198	30F	et From The _	West	Line		
Section 19 Townshi	n 1	l1S	Rang	26	35E	, NI	MPM,		Lea		County		
, and a second	·	,						<u> </u>					
II. DESIGNATION OF TRAN	SPORTE	R OF O	IL A	ND	NATU	RAL GAS	e address to wh	ich approved	conv of this fo	orm is to be se	nt)		
Name of Authorized Transporter of Oil Enron Oil Trading & Tr	anspett	or Conte	1 1	יטי טי	D.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, TX 77151-1188							
Name of Authorized Transporter of Casin				ry C		Address (Gir	re address to wh	ich approved	copy of this f	orm is to be se			
Warren Petroleum Co.	Petroleum Co.									OK 74101			
If well produces oil or liquids, ive location of tanks.	Unit I K	Sec. 19	Twp). 15 I	_	Is gas actual Yes	ly connected?	When	4-4-85	5 .			
f this production is commingled with that						ling order num	iber:						
V. COMPLETION DATA		Oil Wel			as Well	New Well		Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion		_i	i			Total Davis		<u> </u>	1	<u> </u>			
Date Spudded	ded Date Compi. Ready to Prod.					Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) Perforations						Top Oil/Gas	Pay		Tubing Der	Tubing Depth			
									Depth Casi	Depth Casing Shoe			
		TUBINO	. CA	SIN	IG AND	CEMENT	ING RECOF	ש					
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET	•		SACKS CEMENT				
				-		-	· · · · · · · · · · · · · · · · · · ·						
													
V. TEST DATA AND REQUE	EST FOR	ALLOV	VABI	LE		. 1	d ton al	loughle for th	is death or he	for full 24 ho	urs.)		
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of T		e of lo	oad o	il and mus	Producing 1	Method (Flow, p	ump, gas lift,	etc.)	. , , , , , , , , , , , , , , , , , , ,			
Date First New Oil Run 10 Tank	Date of	. COL ,											
Length of Test	of Test Tubing Pressure		Casing Pressure				Choke Size						
	Oil Bhi	O'I Pile				Water - Bbls.			Gas- MCF	Gas- MCF			
Actual Prod. During Test	Oli - Boi	Oil - Bbls.											
GAS WELL									<u> </u>				
Actual Prod. Test - MCF/D	Length o	of Test				Bbls. Cond	lensate/MMCF		Gravity of Condensate				
	700	781				Casing Pre	essure (Shut-in)		Choke Size				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)						(,						
VI. OPERATOR CERTIF	ICATE C	F CON	/PL	IAN ion	NCE		OIL CO	NSER\	ATION	I DIVIS	ON .		
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.						Date ApprovedJAN 2 3 '92							
Quanita So	odle	tt,	14	(Ву	ORIGINA	L SIGNED	BY JERRY	SEXTON			
Signature Juanita Goodlett - Production Supvr.						By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR							
Printed Name		(505)	748-			- T it	le	 					
Date			Teleph	one i	No.	- 11							

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.

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DISTRICT I
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OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azlec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	O TRAI	NSPO	RT OIL	AND NAT	URAL	_ GA		DI No			
Operator YATES PETROLEUM CO	Well API No. 30-025-23379											
Address 105 South 4th St.,	Artesia	, NM	88210	0								
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator		Change in	Transport Dry Gas Condens			r <i>(Please</i> ecti	•	-	anuary	1, 1991		
if change of operator give name and address of previous operator											 	
• •	ANDIEA	CE										
II. DESCRIPTION OF WELL Lease Name	AND LEA	Well No.	Pool Na	me, Includir	ng Formation				of Lease		ase No.	
Lonestar AAI St	1	1			le Dra	v Pe	rmo	State	Federal or Fee	LG-22	247	
Location	100			50	+h	Pe				Wost		
Unit Letter K	: 198	<u> </u>	Feet Fro	m The SC	uth Line	and <u></u>	900	Fe	et From The	WCSC	Line	
Section 19 Townshi	p 11S		Range	35E	. , N N	ирм,	_Le	a			County	
III. DESIGNATION OF TRAN				NATU	RAL GAS							
Name of Authorized Transporter of Oil Pride P/L Co.	Pride P/I Co P.O. Box 2436 - Abilene, TX							e, TX 7	9604			
Name of Authorized Transporter of Casin	of Authorized Transporter of Casinghead Gas or Dry Gas Warren Petroleum Co.					Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 - Tulsa, OK 84101						
If well produces oil or liquids,							When			-		
give location of tanks.	K	19	118			Yes		L	4-4-85			
If this production is commingled with that IV. COMPLETION DATA	from any othe								l pr Dark	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	1 0	ias Well	New Well	Worke	over	Deepen	Plug Back	Same Res v	Dill Res v	
Date Spudded					Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth		
Perforations	1				Depth Casing Shoe							
	Т	UBING.	CASIN	NG AND	CEMENTI	NG RE	COR	D				
HOLE SIZE					DEPTH SET				SACKS CEMENT			
									 			
	OT POD 4	TT OW	ADLE									
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR A	LLUW i ial volume	ABLE of load o	oil and musi	be equal to o	exceed	top allo	wable for th	is depth or be	for full 24 hou	urs.)	
Date First New Oil Run To Tank	Date of Te				Producing M	ethod (F	low, pu	ump, gas lift,	etc.)			
Length of Test	Tubing Pre	ssure			Casing Press	иге	-		Choke Size			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbis.							Gas- MCF			
GAS WELL					<u> </u>				10 5	Carl		
Actual Prod. Test - MCF/D	Length of	Test		Bbls. Conde	asate/Mi	MCF		Gravity of Condensate				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
VI. OPERATOR CERTIFIC 1 hereby certify that the rules and regularity beautiful and properties of the	ulations of the	Oil Conse	rvation			OIL (201	NSERV		DIVISIO		
is true and complete to the best of my	knowledge a	nd belief.		•	Date	e Ap p	rove	ed	UEG	17 199	W	
Granita GO	xollet	+9	~(By_	ϵ_i	18. La	TAL WORL	EL SY JET	RY SEXTOR	¥	
Juanita Goodlett -	- Produc		Title		Title					10 0 2		
12-14-90	(5	05) 74	8-14	71								

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