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State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

O. C. D. ARTESIA OFFICE

OCT 1 8 1991

1000	Rio	Brazos	Rd.,	Aziec,	MM	87410	
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REQUEST FOR ALLOWABLE AND AUTHORIZATION

l.		TOTHA	NSP	ORT OIL	_ AND NA	TURAL GA	AS					
Operator			- -			, 17 166 (47		API No.				
YATES PETROLEUM CORPORATION						30-005-10097						
Address			000				I- <u></u> -					
105 South 4th St.,	Artesi	a, NM	882	10								
Reason(s) for Filing (Check proper box) New Well		a	œ.		Oth	er (Please explo	ain)					
	0"	Change in		(7					4			
Recompletion	Oil		Dry G		EFI	FECTIVE A	UGUST :	30, 1991	`			
If change of operator give name	Catinghei	ad Gas XX	Conde	neatc []								
and address of previous operator												
II. DESCRIPTION OF WELL	AND LE	ASE								•		
Lease Name		Well No. Pool Name, Including			ng Formation			Kind of Lease		Lease No.		
Mc Alester AAH State		1 1	Tol	bac Pen	n		State	Rederal or Fe				
Location		***************************************								.50		
Unit LetterD	_ :55	3.5	Feet Fe	om The No	rth Lin	561.	3 🙀	est Emm The	West	Line		
								cet Profit life				
Section 34 Townsh	p 8S		Range	33E	N	MPM,	Chaves	3		County		
M DESIGNATION OF THAN	ienanae	ים מדי מי		TO BE A DOCK	D. F. G. G							
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPOICTE	or Condens		MATU		e address to wh	ich annen	I come of this	nem le to be			
Western Oil Transport	ation C				1	x 1183,				•		
Name of Authorized Transporter of Casin			or Dry	Gas [Address (Glu	e address to wh	deh anne	Loony of this	/ ZDI-118	<u></u>		
Trident NGL, Inc.		اهما			PO Box	50250,	Midland	1. TX 7	чт ы ю ве зе 9710	ni j		
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.			When					
lve location of tanks.	_iDi	34	8s	1 33e	Yes		1	 1-24 - 8	5			
f this production is commingled with that	from any od				ing order num	ber:		1-74-0				
V. COMPLETION DATA										,		
Designate Type of Completion	(V)	Oil Well		Gus Well	New Well	Workover	Doepen	Plug Back	Same Res'v	Diff Res'v		
		<u> </u>	l_	····	M . 1 %	1	1	1				
Dute Spudded	Date Com	pl. Ready to	Prod.		Total Depth		•	P.B.T.D.		-		
Elevations (DF, RKB, RT, GR, etc.)	Nome of P	D 1			Top Oil/Gas	To- Oli O- No.						
Elevations (DF, RKD, RI, OK, 810.)	Name of I	roducing For	IIIMIIOO		TOP OIL CAS	• • у		Tubing Dep	ર્ધા			
Perforations					I			Dest Co	a Cha			
							•	Depth Casir	ik suos			
	ำ	באומוזם	CASI	NG AND	CEMENTY	NG RECOR	n					
HOLE SIZE					CEMENTI		<u>υ</u>		24.0142.57			
HOLL SIZE	- CA	SING & TU	DING .	DIZE	· · · · · · · · · · · · · · · · · · ·	DEPTH SET		-	SACKS CEMI	ENT		
	-											
	-			·				-				
V. TEST DATA AND REQUE	ST FOR A	LLOWA	BLE		l							
OIL WELL (Test must be after .					be equal to or	exceed top allo	wable for th	is depth or be	for full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of Te		<u> </u>			thod (Flow, pu						
Length of Test	Tubing Pressure			Casing Pressure			Choke Size	Choke Size				
							0.1400					
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF	GRE- MCP				
0.0	1				1							
GAS WELL												
Actual Prod. Test - MCF/D	Length of	Length of Test			Bbls. Condensate/MMCP			Gravity of Condensate				
		MIL V						0.4.6				
Tosting Method (pitot, back pr.)	Tubing Pr	ng Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
					ļ							
VI. OPERATOR CERTIFIC	CATE OF	F COMP	LIAI	VCE		OII 001	IOED!	/ATIO1:	D.I. (10)	~~		
I hereby certify that the rules and regu					11	OIL CON	49FHA					
Division have been complied with and			n abov	c	11 .			UUL	22199	21		
is true and complete to the best of my	knowledge a	und Dellef.			Date	Approve	d		~ N RX	/ I		
Quarita Good	Dala	<i>a</i> .										
	let.	- Of			By	ORIGINAL	SIGNED I	Y JERRY S	EXTON			
Signature Juanita Goodlett -	Produc	tion Se	ipvr	•	-, -	ORIGINAL DIS	TRICT I SI	JPERVISOR				
Printed Name			Title		Title				-			
10-17-91	(5		8-14		II TILLE					TT - TT		
Date		Tele	phone !	Na.								

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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