Submit 5 Copies
Appropriate District Office
DISTRICT I
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

Santa Fe, New Mexico 87504-2088

OOO Rio Brazos Rd., Aztec, NM 87410				E AND AUTHORIZA						
TO TRANSPORT OIL A				<u>AND NATURAL GAS</u>	1 357.11 A T	N NI-		 -		
Operator						Well API No. 30-005-20869				
YATES PETROLEUM CORPO	JRATION					20003				
ddress		88210								
105 South 4th St., At	ctesia, NM	80210		Other (Please explain)						
eason(s) for Filing (Check proper box)	Chang	ge in Transport	ter of:	_		1000	`TT			
ew Well	Oil	Dry Gas	1 1	EFFECTIVE NOVE	EMBER I	, 1993 - ()IL			
ecompletion \Box	Casinghead Gas			EFFECTIVE JULY	1, 19	93 - GAS				
hange in Operator	Cashighead Gas	MA Concent								
d address of previous operator										
. DESCRIPTION OF WELL A	AND LEASE									
ease Name	Well No. Pool Name, Including				g Formation Kind of I					
Union SI Federal	6	Tom	ahawk S	SA	Ştatq, F	ederal of Fee/	NM-0	558018		
ocation						_				
Unit LetterG	. 1650	Feet Fro	om TheN	orth Line and 1650	Fee	t From The	ast	Line		
Omt Dettet					Chave			a .		
Section 1 Township	8S	Range	31E	, NMPM,	Cliave			County		
I. DESIGNATION OF TRAN	SPORTER O	F OIL AN	D NATUI	RAL GAS	h approved	conv of this form	is to be ser	ut)		
lame of Authorized Transporter of Oil X or Condensate				Address (Give address to which approved copy of this form is to be sent) PO Box 4648, Houston, TX 77210-4648						
Scurlock-Permian Corporation				Address (Give address to which approved copy of this form is to be sent)						
lame of Authorized Transporter of Casing	ghead Gas	or Dry	Gas	PO Box 1589, Tul	sa. OK	74101	B 10 00 30	-/		
Warren Petroleum Corp					When					
f well produces oil or liquids,	Unit Sec.	Twp.	Rge.	Is gas actually connected?	1 Atten	11-18-83	3			
ve location of tanks.	$\downarrow c \downarrow 1$		31	Yes						
this production is commingled with that	from any other lea	se or pool, giv	e commingl	ing order number:						
V. COMPLETION DATA				L M. M. Wadana	Deepen	Plug Back Sa	me Res'v	Diff Res'v		
m		Well (Gas Well	New Well Workover	Deepen	l Ling Dack law	ile Kes .	j		
Designate Type of Completion	Date Compl. Re	ade to Prod		Total Depth		P.B.T.D.		_1,		
Date Spudded	Date Compi. Re	any to riou.								
OR DEED DEED CO	Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth	Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.)	Name of Froduc	ang i omamon	•							
			 			Depth Casing S	hoe			
Perforations										
	TIR	ING CASI	NG AND	CEMENTING RECORD)					
11015 0175		& TUBING		DEPTH SET		SA	CKS CEM	ENT		
HOLE SIZE	- OASING	a robino	0.22							
										
										
V. TEST DATA AND REQUE	ST FOR ALL	OWABLE	2							
OIL WELL (Test must be after	recovery of total v	olume of load	oil and mus	t 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 Test			Producing Method (Flow, pu	mp, gas lift,	etc.)				
						Choke Size				
Length of Test	Tubing Pressur	ē	_	Casing Pressure		Choke Size				
					Gas- MCF					
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.		Gas- MCF				
-										
CACMELI										
GAS WELL Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF		Gravity of Co	ndensate			
Mental Floor Foot - Michigan										
Tailer Mathed (nited back pr.)	ig Method (pitot, back pr.) Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)		Choke Size				
resung Meurod (phos., odek pr.)										
	CART OF C	VOI ATT TA	NICTO							
VI. OPERATOR CERTIFI	CAIL Oi C	ולגנע בנייט. ייייים	ناب		\SER\	/ATION [)IVISI	NC		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				Date Approved0CT 2 7 1993						
Division have been complied with an is true and complete to the best of m	iv knowledge and l	belief.		Data Annes	ر _م 0	CIZIB	5 3			
<i>[</i>]				Date Approve	;u					
Lanta Sodlett				∐·						
				By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR						
Signature Juanita Goodlett - Production Supervisor										
Printed Name	505	Title /748-147	7 1	Title						
10-25-93		·		-						
Date		Telephone	¢ 1.40°	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.

2) All sections of this form must be filled out for allowable on new and recompleted wells.