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

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

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TOU AND NATURAL GAS

TO TRANSPORT OIL AND NATURAL GA							Well AF	Well API No.			
PETATOR YATES PETROLEUM CORPORATION						30-005-21022					
dress		NM A	8210								
105 South 4th St., A ason(s) for Filing (Check proper box)	rresia,	1111 0	<u> </u>	·	Other	(Please explai	in)				
ew Well	C	hange in			यचचच	CTIVE NO	VEMBER 1	. 1993			
completion	Oil		Dry Gas		LffE	CIIVE NO	VERIDER 1	., 1775			
nange in Operator	Casinghead	Gas	Condens	ate					-		
hange of operator give name l address of previous operator											
DESCRIPTION OF WELL	AND LEA	SE	<u> </u>		- Etion		Kind of	Lease	Le	ase No.	
ease Name Brahman ACC State	Vame Well No. Pool Name, Include			te SA	g romation			State, Verhoftal by Fee LG 2753			
ocation	. 990		Weet Em	om The N	orth_Line	and2310	Fee	et From The	<u>East</u>	Line	
Unit LetterB	_ •							Chaves		County	
Section 16 Townshi	, 8S	/	Range	31E	, NN	IPM,		Citaves		County_	
I. DESIGNATION OF TRAN	SPORTE	R OF O	IL ANI	D NATUI	RAL GAS			of this form	is to he se	nt)	
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 Corp	oration		Des	Cos C	PO Box	4648, Ho	uston.	copy of this form	is to be se	nt)	
ame of Authorized Transporter of Casin	ghead Gas		or Dry	U48 []							
f well produces oil or liquids,	Unit B	Sec. 16			Is gas actually connected?		When	When ?			
ve location of tanks. this production is commingled with that	1	_									
V. COMPLETION DATA							l Deerer	Plug Back Sa	me Res'v	Diff Res'v	
	• (X)	Oil Wel	1 (Gas Well	New Well	Workover 	Deepen	Ling pack los	HILL IVES A		
Designate Type of Completion	Date Comp	ol. Ready t	o Prod.		Total Depth		J.,	P.B.T.D.			
					T. OluCas Bree			m 1' Dth			
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations					<u> </u>			Depth Casing	Shoe		
					CITA CITA ION	NG DECO	20	1		····	
	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT		
HOLE SIZE	GA'	SING & I	JOHNG	J.EL							
								 			
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABLE		1						
V. TEST DATA AND REQUE OIL WELL (Test must be after	recovery of to	otal volum	e of load	oil and mus	t be equal to o	r exceed top a	llowable for th	is depth or be for	r full 24 ho	urs.)	
Date First New Oil Run To Tank	Date of Te				Producing N	fethod (Flow,)	ownp, gas lift,	eic.j			
	That to a P	Tubing Pressure				Casing Pressure			Choke Size		
Length of Test	Tubing Pr	Tubing Pressure						G., MCE			
Actual Prod. During Test	Oil - Bbls	Oil - Bbls.				Water - Bbls.			Gas- MCF		
GAS WELL	·				Rhis Cond	ensate/MMCF		Gravity of Co	ondensate		
Actual Prod. Test - MCF/D	Length of	Length of Test			Doto: Constitution						
esting Method (pitot, back pr.) Tubing Pres		Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFI	CATE O	F COM	I LIA	NCE		OIL CC	NSER\	ATION [DIVISI	ON	
I hereby certify that the rules and rep Division have been complied with a	rulations of th	e Oil Con	servation								
Division have been complied with a is true and complete to the best of n	ny knowledge	and belief		•	Da	te Approv	$_{\rm red} = 00$	T 27 199	N 		
\mathcal{Q}					- 11						
Manita Dandless					∥ ByŁ	BYDRIGINAL SIGNED BY JERRY SEXTON					
Signature Juanita Goodlett - Production Supervisor					~	DIST	RICT I SUPE	RVISOR			
Printed Name	ı	505/74	Title 8-147	1	Tit	e					
10-25-93			Telephone								
Date			4								

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.