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, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

00 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWAB	LE AND AUTHORIZA	TION				
	TO TRANSPORT OIL AND NATURAL GAS						
perator D 1111 - C		30-005-21026					
Yates Drilling Com	pany			05_21020			
	et, Artesia, N.M. 88210						
eason(s) for filing (Check proper box)		X Other (Please explain)					
ew Well	Change in Transporter of:	Name Change: A	pache S	tate "27 <mark>'</mark>	#1 to		
ecompletion \Box	Oil Dry Gas Casinghead Gas Condensate	C	actus Q	ueen Unit	#3		
hange in Operator	Casinghead Cas [] Contensate []						
change of operator give name d address of previous operator							
DESCRIPTION OF WELL	AND LEASE				·		
easc Name	Well No. Pool Name, Includi	State, F		Lease ederal or Fee	m) or ties		
Cactus Queen Unit	3 SE Chaves	<u> Dueen Gas Area Ass</u>	od.		LH-1648		
ocation			0 -	r 70 .	Heat	1:	
Unit Letter N	:330 Feet From The	South Line and 231	U 1·ect	1 rom the	West	Line	
Section 27 Townshi	ip 12S Range 31E	, NMT'M,	Chaves			County_	
	VSPORTER OF OIL AND NATU	RAL GAS Address (Give address to which	h approved o	one of this form	is to be sent		
lame of Authorized Transporter of Oil	P.O. Box 159, Artesia, N.M. 88210						
Navajo Refining Co lame of Authorized Transporter of Casin		Address (Give address to which				-	
well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When 7	•			
ve location of tanks.	<u> 0 27 128 31E</u>		l				
this production is commingled with that V. COMPLETION DATA	from any other lease or pool, give comming	ung order number.					
. COMPLETITION DATA	Oil Well Gus Well	New Well Workover	Deepen	Plug Back Sa	ime Res'v	hill Res'v	
Designate Type of Completion	1 - (X)		l				
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.			
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Oil/Gas Pay	Top Oil/Gas Pay		Tubing Depth		
erforations				Depth Casing	Shoe	-	
				<u> </u>			
		CEMENTING RECORD		OLOVO OTLICAT			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT			
							
V. TEST DATA AND REQUI	EST FOR ALLOWABLE						
	recovery of total volume of load oil and mu	it be equal to or exceed top allow	vable for this	depth or he for	full 24 hours	·.)	
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pun	np, gas iiji, e	ic.)			
ength of Test Tubing Pressure		Casing Pressure		Choke Size			
Length of Test	Tubing Flessine						
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.		Gas- MCF			
-				<u> </u>			
GAS WELL							
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Co	ndensate		
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		Choke Size			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-m)	Casing Pleasure (Shut-in)		Chore shire			
M ODED ATOD CUDTUCI	CATE OF COMPLIANCE			_!			
I hereby certify that the rules and rep		OIL CON	SERV	ATION [DIVISIO	Ν	
Division have been complied with a	Date Approved JUL 1 & 1990						
is true and complete to the best of m	ny knowledge and belief.	Date Approved	d b	L	100A		
a/a4							
· //	knei	By SRIGH	MOIE IAV	O BY JERRY	- 		
Signatylre / Karen J. Leishman	Production Clerk		DISTRICT	<mark>"D BY JERRY</mark> 1 SUPSRVISC	OR CALLERY		
Printed Name	Title	Title					
6-13-90	(505) 748-1471 Telephone No.						

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.