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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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Saina Fe, New MEXICO 87504-2088

, , ,					BLE AND A						
I.		TO TRA	NSP	ORT OIL	AND NA	TURAL G					
Operator Vector Drilling Company						Well API No. 30-005-21116					
Yates Drilling Comp	any						30-0				
105 South 4th Stree	t, Art	esia, N	NM 8	8210							
Reason(s) for Filing (Check proper box)					Othe	T (Please expl	ain)	•			
New Well		Change in	Transpo	orter of:							
Recompletion	Oil		Dry G2	_							
Change in Operator	Casinghe	ad Cas	Conder	isate							
If change of operator give name and address of previous operator		· · · -·		··							
II. DESCRIPTION OF WELL	AND LE	ASE	,				····			•	
Lease Name	Well No. Pool Name, Include						Ederal or Fee No. 00/20				
· · · · · · · · · · · · · · · · · · ·			SE C	SE Chaves On Gas Area Assoc.			State,	NM-90439			
Location Unit LetterF	:1	330	_ Feet Fr	om The $\frac{Nc}{2}$	orth Line	and) <u>0</u> Fe	et From The _	West	Line	
Section 34 Township	12S		Dance	31E	NT.	ити, (Chaves			Country	
Section 34 Townshi	125		Range	JIE.	, INF	MI'M,	maves	·····		County	
III. DESIGNATION OF TRAN	SPORTI			D NATU							
Name of Authorized Transporter of Oil	\square	or Conder	sale		Address (Give address to which approved copy of this form is to be sent)						
Navajo Refining Company					P.O. Box 159, Artesia, NM 88210						
lame of Authorized Transporter of Casinghead Gas or Dry Gas NA					Address (Give address to which approved copy of this form is to be sent)						
If well produces oil or liquids, give location of tanks.	Unit O	Sec.	Twp. 12S		Is gas actually	v connected? NO	When	?			
If this production is commingled with that IV. COMPLETION DATA	from any of	her lease or	pool, giv	ve comming!	ling order numl	er:					
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover	Doepen	Plug Back S	ame Res'v	Diff Res'v	
Date Spudded	Date Con	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		_1	
7-14-93	7-3	7-30-93				3100'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
4434' GR Queen					2975'			2931'			
Perforations								Depth Casing Shoe			
2975 '-2980 '			~					<u> </u>		··· · · · · · · · · · · · · · · · · ·	
		TUBING, CASING AND						T 222222			
HOLE SIZE		ASING & T	UBING !	SIZE	DEPTH SET			SACKS CEMENT			
<u>8 5/8''</u>		24#			402'			250 sxs.			
5. 1/2"	17#				3100'			755 sxs.			
							······································	-			
V. TEST DATA AND REQUES	T FOR	ALLOW	ABLE		<u></u>			 			
OIL WELL (Test must be after t	ecovery of	total volume	of load	oil and musi	t be equal to or	exceed top all	owable for thi	s depth or be fo	r full 24 hou	ers.)	
Date First New Oil Run To Tank	k Date of Test				Producing Method (Flow, pump, gas lift, etc.)						
7-30-93	8-12-93				Pump Casing Pressure Choke Size						
Length of Test	Tubing Pr	Tubing Pressure				Casing Pressure					
24 hrs. Actual Prod. During Test	Oil - Bhi	Oil - Bbls.				Water - Bbls.			Gas- MCF		
16.73		15.35				1.38			TSTM		
	11_	رد.ر	··		<u>,</u>	<u> </u>					
GAS WELL Actual Prod. Test - MCT/D	Length of	l Test			Bbls, Conder	is te/MMCP		Gravity of Co	ondensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	ATE O	F COM	PLIA	NCE		OII	VOED: :	ATION		211	
I hereby certify that the rules and regu							12FHV	ation [אטועונ	אכ	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved AUG 1 8 1993						
Karen J. Cocknai						Orig. Signed by					
Signature					∥ By_	By Paul Kautz					
Karen J. Leishman Production Clerk							!	Geologist			
Printed Name 8-16-93	50	5-748-	Title 1471		Title						
Date			lephone	No.							
					_1:						

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.