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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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator											
YATES PETROLEUM CO	RPORAT	ION									
Address	A +	a MM	992	10							
105 South 4th St.,	Artesi	a, NM	002	.10	Othe	r (Please explai	in)				
Reason(s) for Filing (Check proper box)		Change in	Tenner	orter of		(1 10000 00)	,				
New Well	03		Dry C		Ef	fective I	Date: 3	January	1, 1991		
Recompletion $\square$	Oil Casinghea		Cond					_			
Change in Operator  f change of operator give name	Camingnea	U 045									
nd address of previous operator					<del> </del>						
I. DESCRIPTION OF WELL	AND LE	ASE									
ase Name Well N			Pool	Name, Includi	ng Formation	Permo-Upper Per State Fe			Lease Lease No.  Ederal or Fee LG-3675		
Swan VB State		3	Sa	unders	Permo-	-Upper ]	Permane	rederal or ree	LG-3	3675	
Location											
Unit LetterL	. 198	30	Feet !	From The SO	uth_Lim	e and66		t From The _	west	Line	
	•					Ψ -				_	
Section 21 Township	, 14S		Rang	e 33E	, NI	мрм, Le	<u>a</u>			County	
					DAY 040						
III. DESIGNATION OF TRAN					Address (Giv	e address to wh	ich approved	copy of this fo	orm is to be se	ent)	
Name of Authorized Transporter of Oil	K PERMIA	or Conder	FF Q.	1.61	1 '	30x 1183				·	
Permian corp.				ry Gas	Address (Giv	e address to wh	ich approved	copy of this fo	orm is to be se	ent)	
Name of Authorized Transporter of Casing				Iy Cas []		Box 158					
Warren Petroleum	Unit	Sec.	Twp.	l Roe		y connected?	When				
If well produces oil or liquids, give location of tanks.	l T	21		4SI 33E	1		i	6-12-	84		
If this production is commingled with that	from any of										
IV. COMPLETION DATA			<b>F</b> ,	<b>D</b>							
		Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	i	1		1	1	<u> </u>	<u> </u>			
Date Spudded	Date Con	npl. Ready t	o Prod		Total Depth			P.B.T.D.			
						Top Oil/Gas Pay			M. Line Donath		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Tob On Oas	top Olivous ray			Tubing Depth		
									Depth Casing Shoe		
Perforations									J		
		TIDING	CA	SING AND	CEMENT	ING RECOR	2D				
					CEMENTING RECORD DEPTH SET			SACKS CEMENT			
HOLE SIZE	- <u>-                                  </u>	ASING & I	OBIN	G SIZE							
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABI	E						- 1	
OIL WELL (Test must be after	recovery of	total volum	e of lo	ad oil and mu	s be equal to	or exceed top all	lowable for th	is depth or be	for Jul 24 no	<u> </u>	
Date First New Oil Run To Tank	Date of				Producing N	Method (Flow, p	oump, gas lift,	elc.)			
					Carina Para			Choke Size			
Length of Test	Tubing I	Tubing Pressure				Casing Pressure					
					Water - Bh	Water - Bbis.			Gas- MCF		
Actual Prod. During Test	Oil - Bbls.				Water - Dolla						
GAS WELL					Inter-Con-	encate AAACE		Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length	Length of Test				Bbls. Condensate/MMCF			Giarity of Communication		
		0.100				Casing Pressure (Shut-in)			Choke Size		
Testing Method (pitot, back pr.)	g Method (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Flessure (Silot III)					
					-			- 1			
VI. OPERATOR CERTIFIC	CATE (	OF COM	1PLI	ANCE		OIL CO	NSER\	/ATION	DIVISI	ON	
I hereby certify that the rules and reg	ulations of	the Oil Con	servati	ON.	-	0.2 00					
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				JU	
is true and complete to the best of m	y mowiedg		•		∥ Da	te Approv	ea		- , , 4		
Our mit of Co	MA	A-0.	1	C							
Quanita Goodlot 9/6					By	By ORDERS STONED BY FORM SEXTON					
Signature Juanita Goodlett	- Prod	uction	Sup	vr.			A THE	130 MV	<b>JUR</b>		
Printed Name				tle	Tit	le					
12-14-90		(505)									
Date		1	elepho	one No.	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.
- 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.