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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

DISTRICT III

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

Santa Fe, New Mexico 87504-2088

000 Rio Brazos Rd., Aztec, NM 87410		EST FOR										
TO TRANSPORT OIL AND NATURAL GAPPORATION								Well API No. 30-025-29827				
YATES PETROLEUM CORPORATION Address												
105 South 4th St.,	Artesia	, NM 8	3821	0			 -					
Reason(s) for Filing (Check proper box) New Well		Change in Ti	ra nenor	ter of:		Other (Plea	ase explaii	1)				
Recompletion	Oil		iauspoi Iry Gas			Effect	ive D	ate: 2-	1-92			
Change in Operator	Casinghead		Conden									
f change of operator give name and address of previous operator	1								•			
• •	ANDIEA	CE				*					•	
I. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including						g Formation Kind of				Lease No.		
Mesa AAF State						- I -			State Federal or Fee		E-8087	
Location												
Unit LetterM	99	<u>0</u> F	eel Fro	om The $\frac{S_0}{S_0}$	outh	_ Line and .	990	Fe	et From The _	West	Line	
Section 28 Townshi	p 13	S F	Range	33	E	, NMPM,			Lea		County	
III. DESIGNATION OF TRAN												
Name of Authorized Transporter of Oil SOTTO Line 1989 Corp.						Address (Give address to which approved copy of this form is to be sent)						
Enron Oil Trading & Transpersation 1 1 03 Name of Authorized Transporter of Casinghead Gas or Dry Gas						P.O. Box 1188, Houston, TX 77151-1188 Address (Give address to which approved copy of this form is to be sent)						
Warren Petroleum		<u>`</u>			L				OK 741			
If well produces oil or liquids,	Unit	•	ľwp.	Rge	1 -	actually con	nected?	When		-		
give location of tanks.	M	28		S 33E		es		L	4-13-8	/		
If this production is commingled with that IV. COMPLETION DATA	Irom any oun	er lease or po	ooi, giv	e comming	nug ome	er numoer:		·				
		Oil Well		Gas Well	New	Well Wo	rkover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	ii	_İ_		<u> </u>	i					1	
Date Spudded	Date Comp	ol. Ready to l	Prod.		Total 1	Depth			P.B.T.D.			
Elevations (DE DED DT CD etc.) Name of Budging Engagement					Top O	Top Oil/Gas Pay				Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation								raome popul				
Perforations					_1				Depth Casin	g Shoe		
			2407		(TE) (EN TOTAL OF	DECOD!		<u> </u>			
LIOLE CIZE	TUBING, CASING AND CASING & TUBING SIZE				CEM	DEPTH SET				SACKS CEMENT		
HOLE SIZE	SING & TO	ING & TUBING SIZE			DEF THOSE							
								***	ļ			
V. TEST DATA AND REQUE	CT FOD A	TIOWA	RIF		<u> </u>				<u> </u>			
OIL WELL (Test must be after	recovery of to	ital volume o	fload	oil and mu	si be equ	al to or exce	ed top allo	wable for thi	s depth or be j	for full 24 hou	ers.)	
Date First New Oil Run To Tank	Date of Te					cing Method				1		
					-	Cosing Program				Choke Size		
Length of Test	Tubing Pro	Tubing Pressure				Casing Pressure				1		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.				Water - Bbls.						
					_1			.				
GAS WELL Actual Prod. Test - MCF/D	[] anoth of	Test			Rhie	Condensate/	MMCF		Gravity of G	Condensate		
Actual Flod. 1est - MCF/D	Length of Test				Dois.	Dois, Conscission III						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casin	Casing Pressure (Shut-in)				Choke Size		
VI. OPERATOR CERTIFIC	CATE OF	F COMP	LIAI	NCE	$\dashv \vdash \vdash$		001	ICEDY	ATION			
I hereby certify that the rules and reg	ulations of the	Oil Conserv	/ation			OIL		19⊏K∧	ATION	וסואוח	UIV .	
Division have been complied with an is true and complete to the best of my	d that the info y knowledge a	ormation give ind belief.	n abov	/c		Date A	oprove	d	JAN 2	3 '92		
Quanita Socdlett /al						ORIGINAL SIGNED BY JERRY SEXTON						
Signature Juanita Goodlett	- Produc	tion S	upvr	· <u>-</u>		-, 			SUPERVIS	OK		
Printed Name 1-16-92	/ 1	505) 74	Title	71		Title	·					
± ±U J4	1 '	/4/	14									

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 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.

Telephone No.

- 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.

RECEIVED

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