– Submit 5 Copies Appropriate District Office <u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Anesis, NM 88210 DISTRICT III	OIL C	ONSERVA' P.O. Bo	ral Resources Departmen			Form C-104 Revised 1-1-89 See Instructions at Bottom of Page	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 Y			LE AND AUTHORIZ				
I. Operator YATES PETROLEUM COF				Well AP	1 No. 25-31110)	
Address 105 South 4th St., /		88210		l			
Resson(s) for Filing (Check proper box) New Well X Recompletion Change in Operator	Change in Oil	Transporter of: Dry Gas	F	A ADED A	FTER	MUST NOT BC 9-1-91 TION TO R:4070	
If change of operator give name and address of previous operator					· · · · · · · · · · · · · · · · · · ·		
II. DESCRIPTION OF WELL A Lesse Name Red Hat State Unit	ND LEASE Well No.	Pool Name, Includin	gron Reach gronnation 10/10000	Kind of State, Be	Lease edetal pr/P/cg	Lease No. V-1682	
Location Unit LetterO	:3300	Feel From The _So	outh_Line and1980) Feet	From The	EastLine	
Section 2 Township	165	Range 331	E , NMPM,		Lea	County	
III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil Enron Oil Trading & Tr.		L AND NATU	AL GAS Address (Give address to whi ATT: Tax Dept.,				
Enron 011 Trading & Tr. Name of Authorized Transporter of Casingh	Effective	1-1-93	Address (Give address to whi				
If well produces oil or liquids, give location of tanks.	Unit Sec. O 2	16s 33e	is gas actually connected? NO	When ?	When ?		
If this production is commingled with that failed in the second s			ng order number:		<u> </u>	Same Res'v Diff Res'v	
Designate Type of Completion -			New Well Workover X	Deepen	Piug Back		
Date Spudded 12-31-90	Date Compl. Ready to 7-15-9		13250'	1	Р.В.Т.D. 1275	0'	
Elevations (DF, RKB, RT, GR, etc.)	, territe of the second provide second se		Top Oil/Gas Pay		Tubing Depth 10495'		
4192' GR Perforations 10415-10470'	Penn	<u></u>	10415'		Depth Casing		
	TURING	CASING AND	CEMENTING RECOR	I D			
HOLE SIZE	CASING & TU	NG & TUBING SIZE DEPTH SET			SACKS CEMENT		
26"	20"		40'		RediMix 425 sx		
17-3/4"	13-3/8" 8-5/8"		409		2100 sx		
7-7/8"	53		13250'			650 sx	
V. TEST DATA AND REQUES	T FOR ALLOW	ABLE /2-7/	8" @ 10495'/ be equal to or exceed top allo	wable for this	depth or be fa	or full 24 hours.)	
Date First New Oil Run To Tank 6-21-91	Date of Test 7-16-91	-	Producing Method (Flow, pu Pumping	imp, gas lift, ei	ic.)		
Leagth of Test 24 hrs	Tubing Pressure 40		Casing Pressure 40		Choke Size Open		
Actual Prod. During Test 111	0		Water - Bbls. 91		Gas- MCF TSTM		
GAS WELL Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF		Gravity of C	Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shi	ut-in)	Casing Pressure (Shut-in)		Choke Size		
		PLIANCE					
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			OIL CONSERVATION DIVISION				
Division have been complied with and	t that the information given by the second		Data Annrov	he	12 I. S.	1991	
Division have been complied with and is true and complete to the best of my	t that the information g knowledge and belief.						
Division have been complied with and is true and complete to the best of my	knowledge and belief.		By ORIGINA	ed	<u>BY JERRY</u> Superviso	SEXTON	

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.

All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.