

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New MexicoREQUEST FOR (OIL) - (GAS) ALLOWABLE OFFICE New Well
Recompletion

DUPLICATE

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico 9-7-55

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

S. P. Yates

(Company or Operator)

Well No. 4, in NE 1/4 NE 1/4,

(Lease)

A

(Unit)

Sec. 11

T. 17S

R. 34E

NMPM,

Vacuum

Pool

Lea

County. Date Spudded 8-15-55, Date Completed 9-5-55

Please indicate location:

			0

Elevation..... Total Depth 4723', P.E.....

Top oil/gas pay..... Name of Prod. Form.....

Casing Perforations:..... or

Depth to Casing shoe of Prod. String 4675'

Natural Prod. Test 53 BOPD

based on 53 bbls. Oil in 24 Hrs. Mins.

Test after acid or shot well not treated BOPD

Based on..... bbls. Oil in..... Hrs. Mins.

Gas Well Potential.....

Size choke in inches.....

Date first oil run to tanks or gas to Transmission system: 9-5-55

Transporter taking Oil or Gas: Magnolia Pipe Line Co.

Casing and Cementing Record

Size Feet Sax

8-5/8	342	150
5-1/2	4675	250

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge

Approved....., 19.....

OIL CONSERVATION COMMISSION

By:

Title

S. P. Yates

(Company or Operator)

By:

(Signature)

Title

Office Manager

Send Communications regarding well to:

Name S. P. Yates

Address 309 Carper Bldg.
Artesia, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

(File the original and 4 copies with the appropriate district office)

HOBBS OFFICE CCC

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator S. P. Yates Lease Gulf-Angle State
Well No. 4 Unit Letter A S 11 T 17S R 34E Pool Vacuum
County Lea Kind of Lease (State, Fed. or Patented) State
If well produces oil or condensate, give location of tanks: Unit H S 11 T 17S R 34E
Authorized Transporter of Oil or Condensate Magnolia Pipe Line Company

Address _____
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas None
Address _____
(Give address to which approved copy of this form is to be sent)
If Gas is not being sold, give reasons and also explain its present disposition:
Small amount of gas produced is being vented to air.

Reasons for Filing: (Please check proper box) New Well _____ (☒)
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership _____ () Other _____ ()
Remarks: _____
(Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 9th day of September, 19 55

By Thurston W. Barry

Title Office Manager

Company S. P. Yates

Address 309 Carper Bldg.

Artesia, N. Mex.

Approved _____ 19 _____

OIL CONSERVATION COMMISSION

By C. M. Linder

Title Engineer District I.