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SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS	!		
OPERATOR				
PRORATION OFFICE				

	DISTRIBUTION SANTA FE FILE	REQUEST	ONSERVATION COMMISSI. FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (GAS		
1.	Operator Value Drilli	na Company				
	Yates Drilling Company Address					
	207 So. 4th Street, Artesia, N.M. 88210 Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well Change in Transporter of: Recompletion OII Dry Gas Bridges "B" State Tract 2 to: Change in Ownership Casinghed Gas Condensate Simple dual, tubing well.					
	If change of ownership give name and address of previous owner		Simple dual,	tubing well.		
II.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, including Formation Kind of Lease Lease No.					
	Vacuum Unit Tract 2	1 Vacuum (Que	i			
	Unit Letter E; 198	BO Feet From The North in	e and 660 Feet From	The West		
	Line of Section 12 Tov	waship 17S Range	34E , NMPM, Lea	County		
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Oli Condensate Mobil Pipeline Company Name of Authorized Transporter of Casinghead Gas or Dry Gas			Box 900, Dallas, T Address (Give address to which appro Bartlesville, Okla	exas 75221 ved copy of this form is to be sent)		
	Phillips Petroleur If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. E 12 17 34	Is gas actually connected? Wh			
IV.	<u> </u>	th that from any other lease or pool,	•			
	Designate Type of Completic	$\operatorname{On} - (X)$ X Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
	Date Spudaed	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	: Top Oil/Gas Pay	Tubing Depth		
	Perforations	Perforations Depth Casing Shoe				
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must able for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water-Bble.	Gas-MCF		
	GAS WELL Actual Pros. Tost-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED AUG 17 1979 BY Cors Inspector			
	YATES DRILLING COMPANY		TITLE			
	(Signature) Petroleum Engineer (Title) August 10, 1970 (Date)		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.			

Fill out only Sections I, II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.