NO. OF CUPIES HEC	EIVED	
DISTRIBUTIO	NC	
SANTA FE		
FILE		:
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
DOOD ATION OF	-10-	

	SANTA FE  FILE  U.S.G.S.  LAND OFFICE  IRANSPORTER  GAS	REQUEST	ONSERVATION COMMI JON FOR ALLOWABLE AND ANSPORT OIL AND NATURAL (	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-55	
1.	OPERATOR PRORATION OFFICE				
	Yates Drilling Company				
	Address 207 So. 4th Street, Artesia, New Mexico 88210				
	Reason(s) for filing (Check proper box)  Other (Please explain)				
	New Well  Recompletion  Change in Ownership	Change in Transporter of:  Oil Dry Ga  Casinghed Gas Conder			
	If change of ownership give name and address of previous owner			action vilate trace &	
11	DESCRIPTION OF WELL AND I	FACE			
	Leave Name Yates North Vacuum Unit Tract 2	Well No. Pool Name, including Formal Well No. Pool Name, including Formal Well No. Pool Name, including Formal No. Pool Name,		Lease No.  1 or Fee State B-2244	
	Location			4	
	1.0	80 Feet From The North Lin			
	Line of Section 12 Tow	nship 17S Range	34E , NMPM, Lea	E County	
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil		Address (Give address to which approx	and control the form to to be	
	Mobil Pipeline Com	pany	Box 900, Dallas, 1	** * * *	
	Name of Authorized Transporter of Cas		Address (Give address to which appro-	ved copy of this form is to be sent)	
	Phillips Petroleum  If well produces oil or liquids,	Unit Sec. Twp. Age.	Bartlesville, Okla	· · · · · · · · · · · · · · · · · · ·	
	give location of tanks.	F 12 17 34	Yes	6-25-70	
IV.	If this production is commingled with COMPLETION DATA	n that from any other lease or pool,	give commingling order number:		
	Designate Type of Completio		New Well Workover Deepen	Plug Back   Same Resty. Diff. Reafy.	
	Date Spudded	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	
	(21) Kills, KT, OK, etc.)	Traine of Frequency Communication	. Top Gilly Gub Pay	i i	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET		22.000.000.000		
	HOLE SIZE	CASING & TUBING 5.2E	DEPTHSCI	SACKS CEMENT	
			1		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil oth or be for full 24 hours;	and must be equal to or exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	(i, eic.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Proa, During Test	Oil-Bbls.	Water-Bble.	Gaa-MCF	
	GAS WELL		· · · · · · · · · · · · · · · · · · ·		
	Actual Proc. Test-MCF/D	Length of Tes:	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shat-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANC	CE .	OIL CONSERVA	TION COMMISSION	
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED AL'G 17 1970 . 19		
	Commission have been complied wabove is true and complete to the		BY Tesla	1 lemints	
	YATES DRILLING COM	PANY	TITLE 11 5 Och Insp	ectal	
			This form is to be filed in compliance with AULE 1104.		
	(Signature)		If this is a request for allowable for a newly drilled or despense well, this form must be accompanied by a tabulation of the deviation		
	Petroleum Enginee	er	tests taken on the well in accor	dence with RULE 111.  st be filled out completely for allow	
	(Title) August 10, 1970		able on new and recompleted we	oila.	
	(Da	(e)	well name or number, or transport	in III, and VI for changes of owner ten or other such change of condition	
			Separate Forms C-104 mus completed wells.	t be filed for each pool in multiply	