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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

### State of New Mexico En , 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

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	٦	O TRA	NSPC	ORT OIL	AND NA	TURAL GA	S	<u> </u>			
perator						Well A		1			
Harvey E. Yates Co	mpany				30-025-23388						
P.O. Box 1933, Ro	swell,	N.M.	88202	2							
lesson(s) for Filing (Check proper box)					Othe	er (Please expla	in)				
lew Well		Change in	-								
Recompletion X	Oil Casinghead		Dry Gas Conden								
change in Operator Lame	Canadues	, V== [_]	CANAGE				·			<del></del>	
ad address of previous operator	<del> </del>										
I, DESCRIPTION OF WELL	AND LEA	SE	رنبا	~	et Qu	برسف	. د با	( l assa	1 1.	asa No	
Atlantic 32 State		Well No. #1	Pool N	ng Formation	Springs	******	N LESSE Federal or Fee	Lease Lease No. K-1860			
		<i>T</i> -	) bodi	CIT COLD		-I U'					
Unit LetterC	•	660	Feet Fn	om The N	orth Lin	and 198	30 Fe	et From The _	West	Line	
OMI LETTE!											
Section 32 Township	189	<u> </u>	Range	33	BE N	MPM,	· · · · · · · · · · · · · · · · · · ·	LÆ	ea	County	
II. DESIGNATION OF TRANS	SPORTE	R OF O	IL AN	D NATU	RAL GAS						
Name of Authorized Transporter of Oil	(X)	or Conden			Address (Giv	e address to w				NI)	
Pride Pipeline Co	<u> </u>	<del> </del>		P.O. B	ox 2436,	Abilene	. Texas	<u>79604</u>	1		
Name of Authorized Transporter of Casing	thead Gas		or Dry	Address (Giv	ne address to w	hich approved	copy of thu fo	rm 13 10 be 3e	nt)		
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	la gas actuali	y connected?	When	7	?		
ive location of tanks.	C	32	18				i				
f this production is commingled with that f	from any oth	er lease or	pool, giv	ve comming!	ing order num	ber:	·····			<del></del>	
V. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		pi. Ready to	x i		i	<u>L</u>	<u>i</u>	хх	<u> </u>		
Date Spudded	Total Depth			P.B.T.D.	1 7						
12/14/69	11/13/90 (PB)					9,650 Pay		Tubing Dept	4714'		
	vations (DF, RKB, RT, GR, etc.)  Name of Producing Formation								521'		
3754. GL. Perforations	i Qu	een		4436	<u> </u>		Depth Casin	Depth Casing Shoe			
4438-46' (oa)								13	,650		
				CEMENTI	NG RECOR		7 -	PACKS CENERIT			
HOLE SIZE	CA	SING & TI		SIZE	<del> </del>	458		SACKS CEMENT 450			
orig 17 1/2	13 3/8 8 5/8					4 <u>36</u> 4850		550			
orig 11 orig 7 7/8	<del> </del>	5 1/2				3650		865			
	2 3/8										
V. TEST DATA AND REQUES	ST FOR	ALLOW	ABLE	, all and —···	the equal this	r exceed top all	lowable for th	is depth or be	for full 24 hou	urs.)	
OIL WELL (Test must be after r Date First New Oil Run To Tank	Date of T		oj ioad	ou and mus	t be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)						
11/14/90	11/24/90					Pumping					
Length of Test	Tubing Pr				Casing Pres	mile		Choke Size			
24 hrs		_Ø			Water - Bbl			Gas- MCF			
Actual Prod. During Test	Oil - Bbls.				Maret - Bpi			44 MCF			
293	2	293			<u></u>				I'IC	( <u>*</u>	
GAS WELL Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conde	nsate/MMCF	<del>.</del>	Gravity of	Condensate		
Actual Frod. 16st - MCF/D	Lough O										
Testing Method (pitot, back pr.)	Tubing P	ressure (Shi	ul-in)		Casing Pressure (Shut-in)			Choke Size	Choke Size		
	<u> </u>										
VL OPERATOR CERTIFIC	CATE O	F COM	PLIA	NCE		OIL CO	NSERV	/ATION	DIVISION	NC	
I hereby certify that the rules and regu Division have been complied with and	lations of th	e Oil Conse	ervation			J,L J J				, i l	
Division have been complied with and is true and complete to the best of my	Det	e Approv	ed			· '					
	J		4			a whhina	<u> </u>				
Mickie J.	e			By.	• 1	****			TON		
Signature		D 1	Coo	by.					<del> </del>		
Vickie Teel Printed Name		Prod	Title		Title	A					
12/3/90		(505)				·					
Deta .		Te	lephone	No.							

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.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 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.

Submit to Appropriate District Office State Lease - 4 copies Fee Lease - 3 copies

# State of New Mexico E...gy, Minerals and Natural Resources Department

Form C-102 Revised 1-1-89

# **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Harvey E. Yates Company  Usit Laner  Section  Out 18S  Actual Focasge Location of Well:  660  Feet from the North  Ine and 1980  feet from the Vest like  Producing Formation  Outeen	Operator							Lea	se se					Well No.	
Unit Letter C 32 Township C 32								Atlant	ic 32	State			<i>#</i> 1		
Actual Foctage Location of Well:    Solid Feet from the   North   line and   1980   feet from the   West   line	Juit Letter	Sectio	0		Townsh				ge				· .		
From the North line and 1980 feet from the liest line and 3754 GI. Producing Formation   Pool South Corribin wild along the deficial Acreage   August   Pool   Pool						188				SZE	1	MPM	Lea		
Trouting promation Outside the strength of the		Mior of	Well:	37-	4.1.				1	200			1.7oat		
1. Outline the screage dedicated to the subject well by colored pencil or hachure marks on the plat below.  2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).  3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, force-pooling, etc.?    No   If answer is "os" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.  No allowable will be assigned to the well until all interests have been consolidated (by communitization, untilization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.    OPERATOR CERTIFICA   Interest in true and combest of my knowledge and belief.		feet fr					line a			700	fee	t from t	he West		mana.
1. Outline the screage dedicated to the subject well by colored pencil or hachure marks on the plat below.  2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).  3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?  Yes No If answer is "yes" type of consolidation If answer is "oo" list the owners and track descriptions which have actually been consolidated. (Use reverse side of this form if necessary.  No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.  OPERATOR CERTIFICA  I hereby certify that the well too on this plat was plotted from production Sec.  Position  Harvey E. Yates Con Company  12/3/90  Date  SURVEYOR CERTIFICA  I hereby certify that the well too on this plat was plotted from purpervison, and that the same correct to the best of my knowledge and belief.  Date Surveyed  Signature & Scal of			PR			on.		roo	i Couth	Carhin	in A Dich	16	1012		•
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).  3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?  Yes  No all owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)  No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.  OPERATOR CERTIFICA  I hereby certify that the contained herein in true and come best of my involvates and belief.  Signature  Vickie Teel  Printed Name  Production Sec.  Position  Harvey E. Yates Con  Company  12/3/90  Date  SURVEYOR CERTIFICA  I hereby certify that the well loc on this plat was plotted from fit actual surveys made by me or supervision, and that the same correct to the best of my local belief.  Date Surveyed  Signature & Scal of											zu 4	- Winac	-+0	Acres	
unitization, force-pooling, etc.?  Yes No If answer is "yes" type of consolidation  If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if neccessary.  No allowable will be susgized to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.  OPERATOR CERTIFICA  I hereby certify that the contained herein in true and combest of my knowledge and belief,  Signature  Vickie Teel  Printed Name  Production Sec.  Fosition  Harvey E. Yates Contained herein in the well loc on this plat was plotted from fit actual surveys made by me or supervison, and that the same correct to the best of my knowledge.  Date Surveyed  Signature & Seal of			-			•	*	•			•	workin	g interest and	royalty).	
OPERATOR CERTIFICA  I hereby certify that the contained herein in true and com- best of my knowledge and belief.  Signature  Vickie Teel  Printed Name  Production Sec.  Position  Harvey E. Yates Con Company  12/3/90  Date  SURVEYOR CERTIFICA  I hereby certify that the well loc on this plat was plotted from fu- actual surveys made by me or supervision, and that the same correct to the best of my kno- belief.  Date Surveyed  Signature & Seal of	unitizat  If answer this form No allows	tion, for Yes is "no" if necce able wil	ce-pooli list the essary.	owners	? No and tract the well	If and description	swer is "ye ions which interests ha	s" type of have actua	consolidati ally been consolidate	onsolidated.	(Use reverse	side of			
I hereby certify that the well loc on this plat was plotted from fu actual surveys made by me or supervison, and that the same correct to the best of my knobelief.  Date Surveyed  Signature & Seal of	- Command				T_			а аркоче		VIANU.		Si Pr	I hereby pontained hereigns of my brown Vickie Trinted Name Productionition Harvey Fornpany 12/3/90	certify that in in true and ledge and belie Ceel  on Sec.	the information complete to the
Certificate No.												0 a a s s c c b   1   1   1   1   1   1   1   1   1	hereby certif n this plat w ctual surveys upervison, an orrect to the elief. Date Surveyed Signature & Se Professional Su	y that the well vas plotted fro made by m d that the sa best of my	l location show m field notes o we or under m nme is true an
0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0	0 330 660	990	1320	1650	1980 2	2310 2	640	2000	1500	1000	500	$\exists \mid$	Confidence 140.		