

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Harvey E. Yates Co.

Address
P.O. Box 1933, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain) effective November 1, 1987
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Scott "E" Federal	Well No. #1	Pool Name, including Formation Quercho Plain Lower B.Sp.	Kind of Lease State, Federal or Fee Federal	Lease No. NM-24162
Location Unit Letter: <u>K</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u>				
Line of Section <u>28</u> Township <u>18S</u> Range <u>32E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Pride Pipeline	P.O. Box 2436, Abilene, Texas 79604
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips 66 Natural Gas Co.	4001 Penbrook, Odessa, Texas 79761
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>K</u> Sec. <u>28</u> Twp. <u>18S</u> Rge. <u>32E</u>	Yes <u>3/30/82</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Sharon Hill
(Signature)
Production Analyst
(Title)
10-28-87
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 30 1987, 19
BY ORIGINAL SIGNED BY JERRY GEXTON
TITLE DISTRICT I SUPERVISOR

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.

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

RECEIVED
OCT 29 1987
OCD
HOBBS OFFICE