Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REOL				exico 8750		717101				
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS											
Operator YATES PETROLEUM CORPORATION						Well API No. 30-025-30597					
Address 105 South 4th St.,	Artesi	a, NM	882	10							
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Oil Casinghea		Transpo Dry Ga Conde	as 🗆	Othe	EFFECTIV		-89.			
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL Lease Name	ng Formation Kind of Lease Lease No.					Ma					
Aqueduct AGG Federal	i i						of Lease No., Federal or Fee / NM 65970				
Location Unit LetterP	:33	0	Feet Fi	rom The	south Line	and3	30 F	eet From The _	east	Line	
Section 17 Township	, 19s		Range	32e	, NN	ирм,	 -	Lea		County	
Mame of Authorized Transporter of Casinghead Gas Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)											
Phillips 66 Natural G	as				4001 Pe	enbrook,	Odessa	TX 79762			
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 17	Twp.	Rge. 32	Is gas actually connected? When Yes 10			?)-4-89			
If this production is commingled with that f IV. COMPLETION DATA	rom any oth	er lease or	pool, giv	e commingl	ing order numb	er:					
Designate Type of Completion	· (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res v	
Date Spudded	Date Comp	l. Ready to	Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas P	ay		Tubing Depth			
Perforations							 .	Depth Casing Shoe			
	т	HRING	CASD	VC AND	CEMENTIN	IC PECODI					
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE					DEPTH SET	· · · · · · · ·	SACKS CEMENT			
						·					
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE	-			·- ·- ·-				
DIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas									r full 24 hou	3.)	
Length of Test	Tubing Pressure				Casing Pressur	е	·	Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL	2,					-	-		<u>-</u>		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condens	ate/MMCF		Gravity of Condensate			
esting Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
/I. OPERATOR 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 above is true and complete to the best of my knowledge and belief.					OIL CONSERVATION DIVISION NOV 1 4 1989						
Signature Signature					By Orig. Signed by						
Suanita Goodlett - Production Supvr. Printed Name Title 11-7-89 (505) 748-1471						Paul Kautz Geologist Title					
Date			hone 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. 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.