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 RECEIVED

Form C-104 Revised 1-1-89 e Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 O. C. D.

APR 3 0 1992

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator YATES PETROLEUM CORPORATION 30-025-31314 Address 105 SOUTH 4th STREET, ARTESIA, NM 88210 Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: X New Well Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Pool Name, Including Formation Well No. Lease Name State, Federal or Fee/ NM 59392 East Lusk Delaware Lusk AHB Federal 6 Location Feet From The North Line and 990 East 430 _ Feet From The _ Unit Letter _ County 32E , NMPM, Range 35 Township 19S_ III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil XX or Conden Enron Oil Trading & Transportation Name of Authorized Transporter of Oil 77151-1188 PO Box 1188, Houston, TX Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210 Name of Authorized Transporter of Casinghead Gas or Dry Gas XXX Yates Petroleum Corporation When? Is gas actually connected? Unit l Twp. Rge. If well produces oil or liquids, 3-30-92 <u>1</u>9 Yes give location of tanks. 35 32 G If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Res'v Diff Res'v New Well Workover Deepen Oil Well Gas Well Designate Type of Completion - (X) X Х Total Depth P.B.T.D. Date Compl. Ready to P Date Spudded 7840' 7900' 4-9-92 2-29-92 Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 4560' 4597**'** 3568' GR Delaware Depth Casing Shoe Perforations 7900' 4597-7285¹ TUBING, CASING AND CEMENTING RECORD SACKS CEMENT **DEPTH SET CASING & TUBING SIZE** HOLE SIZE 40' Redi-Mix 26" 20" 970 sx 13-3/8" 1140' 17}" 4475 1950 sx 121" 8-5/8" 875 sx 7900' 5 } " 7-7/8" TEST DATA AND REQUEST FOR ALLOWABLE /2-7/8" @ 4560'

equal to or exceed top allowable for this depth or be for full 24 hours.)

OIL WELL (Test must be after recovery by total volume of total and the second of the s						
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)				
3-30-92	4-9-92	Pumping				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
24 hrs	40	40	2"			
}	Oil - Bbls.	Water - Bbls.	Gas- MCF			
Actual Prod. During Test 946	144	802	136			

GAS WELL			Continue of Condensate
Actual Prod. Test - 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. 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. inda Signature
JUANITA GOODLETT -PRODUCTION SUPVR. Printed Name

Title (505) 748-1471

4-28-92 Telephone No. Date

OIL CONSERVATION DIVISION

Date	Approved	MAY 04'92	
Ву_	Catablet Songs by J	PRA CENTON	
Title.	The Court of the section	·	

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.