

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Harvey E. Yates Company

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: | Other (Please explain) Effective 11/19/86 |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil | |
| <input type="checkbox"/> Change in Ownership | <input checked="" type="checkbox"/> Casinghead Gas | |
| | <input type="checkbox"/> Dry Gas | |
| | <input type="checkbox"/> Condensate | |

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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------|------------------------------------------------|-----------------------|
| Lease Name Amoco 1 Federal | Well No. 1 | Pool Name, including Formation North Young Bone Springs | Kind of Lease State, Federal or Fee Federal | Lease No. NM-03677 |
| 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>1</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"/> Pride Pipeline Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436, Abilene, Texas 79604 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc. | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1959, Midland, Texas 79702 |
| If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>1</u> Twp. <u>18</u> Rge. <u>32</u> | Is gas actually connected? <u>Yes</u> When <u>11/19/86</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.

Jayne Collins
(Signature)

Production Analyst

(Title)

November 25, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED: DEC 1 1986, 19

BY: ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

TITLE _____

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.