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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TC	TRANS	PORT OIL	AND NAT	URAL GA	\S			 -		
perator	rator					Well AF			025-28966		
<u> Harvey E. Yates Compan</u> Address	y						Udo	0,0 7	74		
P.O. Box 1933, Roswell	, New Me	exico 88	3202	Otho	t (Please expla	.:_1					
leason(s) for Filing (Check proper box)		hange in Tran	sporter of:	Cone	t (r tease expla		- 4				
New Well	Oil	Dry		Eff	ective:	JAN	1 10	90			
Recompletion \square	Casinghead (densate								
change of operator give name											
ad address of previous operator	······································										
I. DESCRIPTION OF WELL A	AND LEAS	E			·	1					
Lease Name Young Deep in	ut "	<i>1</i> - 1 - 2	Name, Includin	ig Formation	65,	Kind of State, §	ederal or Fe	1 / / 1	53 53		
Unit Letter	: 106) Fee	t From The	THE Line	and 198	<u>0</u> Fee	t From The	West	- Line		
Section 9 Township	18	S Rar	ige 32	E N	ирм,	(ew			County		
II. DESIGNATION OF TRANS	SPORTER	OF OIL	AND NATUI	RAL GAS							
Name of Authorized Transporter of Oil		r Condensate		Address (Giv.	e address to w	hich approved	copy of this f	orm is so be se	ni)		
Pride Operating Compar	ny "			P.O. Bo	x 2436,	<u>Abilené,</u>	Texas	79604			
Name of Authorized Transporter of Casing		⊠ GPM	egs Cerp	pration (Giv	e address 10 w	hich approved	copy of this f	form is to be se	ni)		
Phillips 66 nat	7	EFFECTIV	E. Februar	le gas actuall	2 connected?	When					
If well produces oil or liquids, give location of tanks.	User	9 17	× 132	is gas account.	ues				4		
f this production is commingled with that f	rom any other	lease or pool	give commingli	ing order num	bot:						
V. COMPLETION DATA			, 			_,	·	·,	- ₋		
Deignese Time of Completion		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'y		
Designate Type of Completion		Ready to Pm	l	Total Depth	J	1	P.B.T.D.	1	 /		
Date Spudded	Date Compi.	Date Compl. Ready to Prod.			•						
Elevations (DF, RKB, RT, SR, etc.)	Name of Pro	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
				ļ <u>,</u>	Depth Casing Shoe						
Perforations						Ä.	TDepth Casi 1	ng Shoe			
		IDING C	CINC AND	CEMENTI	NG PECOL	20	<u> </u>				
HOLE SIZE	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE			CEMENTI	DEPTH SE		SACKS CEMENT				
HOLE SIZE	CASI	CASING & TUBING SIZE									
							ļ				
	YD DOD A	LOWER	 	<u> </u>			<u> </u>		40		
V. TEST DATA AND REQUES OIL WELL (Test must be after t	ST FOR A	LLOWAB	LIE	be equal to a	r exceed top al	laumble for thi	s denth or be	for full 24 hou	urs.)		
OIL WELL (Test must be after r Date First New Oil Run To Tank	Date of Test		odd oir and must	Producing M	lethod (Flow, p	ownp, gas lift, i	etc.)	<u></u>			
Date First New Oil Kill 10 1 auc	Date of Lex					7.0	•				
Length of Test	Tubing Pressure			Casing Press	aire		Choke Size				
							Gas- MCF				
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Oas- MCF				
	<u> </u>			<u> </u>			\perp				
GAS WELL	-, 1 2 ·	 		Thur C	neal AAAAA		I Gervin of	Condensate			
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Olavny of Concensio				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Siz	Choke Size			
results oriented (paids, edick pr.)											
VI. OPERATOR CERTIFIC	ATE OF	COMPL	IANCE	7			. ~	D. !! C !	~ · ·		
I hereby certify that the rules and regu					OIL CO	NSERV	AHON	DIVISIO	NC		
Division have been complied with and that the information given above					14104 1000						
is true and complete to the best of my knowledge and belief.				Dat	Date ApprovedJAN 0 4 1990						
\mathcal{L}											
SUM					*	URIGINA	LSIGNED	BY JERRY	SEXTON		
Signature Sharon Hill Production Analyst						Ð	SIRICT	SUPERVISO)R		
Printed Name Title				Title) 						
TANK A		505-623 Teleph	-6601 one No.								
DAIAN M 2 1000		1 elebu	OGC 170.			المستني المستني					

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.

RECEIVED

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OCD HOBBS OFFICE