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

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

## 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., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TOTRANS	PORT OIL	AND NAT	URAL GA	S				
rator			Well AP			100. D2 <i>5-79894</i>			
arvey E. Yates Compa	ny				100-	$\cup \alpha \cup \beta$	1014		
reii	1 New Mexico 88	3202							
O. Box 1933, Roswell son(s) for Filing (Check proper box)	1, New Mexico do	202	Othe	r (Please expla	in)			-	
v Well	Change in Tran					- 4 400	Δ.		
ompletios 🔲	Oil K Dry	<del></del>	Eff	ective:	JAN	m 1 100	11.1		
ange in Operator	Casinghead Gas Con-	densate							
sange of operator give name									
	ANDIEASE								
DESCRIPTION OF WELL	Well No. Poo	Name, Includin	g Formation			Lease		se No.	
vours Deep Chu		Joseph you		ma son	State,	ederal or Fee	NH 13	905	
dation	0.60		9				S. Illa		
Unit Letter	_ :_ <u>1980</u> Fee	i From The ${\cal E}^{a}$	GST Line	and $\mathcal{A}\mathcal{S}$	6 10 Fa	t From The	300 PM	Line	
<b>0</b>	in 185 Rar	nge 32 E	, NI	ирм, (	La			County	
Section Townsh	ip (80 Kar	ige JO C	113!	11 1711					
DESIGNATION OF TRAI	NSPORTER OF OIL	AND NATUE	RAL GAS				<del></del>		
me of Authorized Transporter of Oil	or Condensate		Address (Giv	e address to wh				u)	
Pride Operating Compa	any		P.O. Bo	x 2436, 1	<u>Abilene</u>	Texas	79604		
me of Authorized Transporter of Casi		Ny Ges Co	perenion	t address to w/ 라이	ruch approvea	copy of this j	OF M 13 10 0E 3E	u,	
Phillips 66 No		IVE: Februe	ls gas actuall	y connected?	When	?			
well produces of or liquids,	Unit Sec. Tw	8 32	Uf	es	i				
als production is commingled with the	it from any other lease or pool	, give commingli	ing order num	per:					
COMPLETION DATA					_,		1		
Dianes Time of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'y	
Designate Type of Completion	Date Compl. Ready to Pro	<u> </u>	Total Depth	l	1	P.B.T.D.	l	1/	
ue Spudded	Date Compi. Roady to 1 to.		•						
evations (DF, RKB, RT, GR, etc.)	Name of Producing Forma	ation	Top Oil/G25	Pay	<u> </u>	Tubing Dep	ih.		
				,			- C1		
riorations .						Depth Casii	ig snoe		
	THE PLANT OF THE PARTY OF THE P	A CINIC AND	CEMENITI	NC PECOL	00/0	<u>.l</u>			
No. P 017F		CASING & TUBING SIZE		CEMENTING RECORD DEPTH SET		SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE		DEI III GE						
								<del></del>	
						ļ			
	TO TO DELLA CALLAD	<del> </del>	<u> </u>			<u> </u>			
TEST DATA AND REQU	EST FOR ALLOWAS r recovery of total volume of t	Lite	the equal to 0	r exceed top al	lowable for th	is depth or be	for full 24 hou	urs.)	
IL WELL (Test must be after all First New Oil Run To Tank	Date of Test	odu da una masi	Producing N	lethod (Flow, p	ump, gas lifi,	eic.)	<u> </u>	<u> </u>	
SIS LILE USA OII VAIT 10 1 TITE	Date of Tex								
ength of Test	Tubing Pressure		Casing Press	STIE		Choke Size	:		
				West Phil			Gas- MCF		
ctual Prod. During Test	Oil - Bbls.		Water - Bbls.						
/							<del></del>	<del></del>	
GAS WELL			Bhle Conde	neale/MMCF		Gravity of	Condebate		
ctual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF							
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in	Casing Pressure (Shut-in)			Choke Size				
series theories the h		-							
L OPERATOR CERTIF	ICATE OF COMPI	JANCE		011 00	1055	(ATION	DIVIO	<b>7</b> N I	
I hereby certify that the rules and re				OIL CO	NSERV	_			
Division have been complied with	and that the information given	above				JAN	0 4 199	90	
is true and complete to the best of r	ny knowledge and belief.		Dat	e Approv	ed				
5/////						54	IERRY SEX	TON	
- yuc			∥ By.	· A	DIGINAL S	ONED BY	JERRY SEX ERVISOR		
Signature Sharon Hill P	roduction Analys			. 0	DIST	RICT I SUP	<del>-</del> *-		
Printed Name		Title	Titl	e					
— <del>3/4N ■ 7 104∩</del>	<u>505-623</u> Telepi	1-6601 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.
- 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.

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HOBBS OFFICE

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