Submit 5 Copies
Appropriate District Office
DISTRICT 1
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, Antesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Harvey E. Yates Company							Well API No. 30025-30784				
Address D.O. Poyr 1022 Do	11	Nov. Me	i	0020	<u> </u>						
P.O. Box 1933, Ro	swell,	Mew M	XTCO	8820		et (Please exp	lain l				
New Well	_	Request 2000 bbl test allowable									
Recompletion	Oil		Dry Ga		\cap	· ~		cese ui	TOWADIC		
Change in Operator	Casinghe	ad Gas 🔲	Conden		<i></i>	uly 19	70				
f change of operator give name and address of previous operator											
I. DESCRIPTION OF WELL	AND LE		1								
North Young 3 Federal Well No. Pool Name, Inclu					ing Formation ung Bone Apring S			nd of Lease Lease No. NM-11118			
Location		1,, ''	·		- 3 DOT	w soft cer	9	*			
Unit Letter H	_ :	2310'	. Feet Fr	om The $\frac{N}{2}$	orth Lim	990	F	eet From The	East	Line	
Section 3 Township 18S Range 32					C , NMPM,			Lea County			
					•	***************************************				County	
M. DESIGNATION OF TRAN	SPORTE	or Conden		D NATU			1 1-4	, 	, ,		
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)										
Pride Pipeline Com Name of Authorized Transporter of Casing	P.O. Box 2436, Abilene, Texas 79604 Address (Give address to which approved copy of this form is to be sent)										
Temporal Carrier	pr-20 044	Ш.	or Dry		Numera (Oth	E GOOD ESS TO W	nich approved	copy of this f	orm is to be st	ini)	
well produces oil or liquids, Unit Sec. Twp.				Rge.	is gas actually connected? When			?			
f this production is commingled with that	 	<u> </u>	<u> </u>		1						
V. COMPLETION DATA	Hom any ou	HEL LEADE OF	poor, grv	e comming	nag order num	жг:				- 	
Designate Time of Completion		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		XX			XX Total Depth		1	ļ	L	_L	
•	66ded Date Compl. Ready to Prod. 6/25/90				8905			P.B.T.D. 8846			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
3900.2 GL Bone Springs					8515			8313			
Perforations								Depth Casing Shoe			
8515-8711	CEL CEL CONTROL DE CONTROL			8905							
HOLE SIZE				CEMENTING RECORD			040//0 05/45/17				
17 1/2		ING & TUBING SIZE 13 3/8			DEPTH SET 417			SACKS CEMENT 425			
12 1/4		8 5/8				2800			1400		
7 7/8	5 1/2				8905			1450			
7 110			3/8		8313						
/. TEST DATA AND REQUES	T FOR A				·L		 	- 			
OIL WELL (Test must be after re	ecovery of l	otal volume	of load o	oil and must	T				for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te	:d			Producing Me	thod (Flow, pi	ump, gas lift, i	esc.)			
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
						_					
tual Prod. During Test Oil - Bbls.					Water - Bbis.			Gas- MCF			
GAS WELL	!				L., .,			_L			
tual Prod. Test - MCF/D Length of Test					Bbls. Conden	sale/MMCF	·	Gravity of C	Gravity of Condensate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
(/ ODED ATOD CEDATES	A TOTAL OF		T 7 4 2 3	TCF	<u> </u>		·	<u> </u>			
VI. OPERATOR CERTIFIC. I hereby certify that the rules and regular				CE		OIL CON	SERV.	ATION	DIVISIO	N	
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 k	mowledge a	nd belief.			Date	Approve	d		JUL 0	6 1990	
٠, ٩ ٨					Daie	, thhi ove	J				
U. Jack						•					
V. Teel	Proc	d Sec.			By		ORIG	एवंक्स छाला 	स्ट वर्ग प् र	SY SEXTON	
Printed Name	/50		Title		Title.				\$13 MMG.	107	
7/3/90 Date	(505		6601 phone N	io.							

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.