## Submit 5 Copies Appropriate District Office DISTRICT I 3.0. 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

		San	ita Fe, l	New M	exico 8	7504	1-2088						
ISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410	REQUE	ST FO	R ALL	.OWA	BLE AN	D À	UTHOR	RIZA	TION				
	T	OTRAI	NSPO	RT OII	LAND	TAP	URAL G	BAS		NI NI			
perator							Well API				-025-31645		
YATES PETROLEUM COI	RPORATIO	JN					<del></del>						
Address 105 South 4th St., 4	Artesia	, NM	88210	)									
Reason(s) for Filing (Check proper box)						Other	(Please ex	plain)					
New Well XX		hange in	Transport Dry Gas	er of:									
Recompletion $\square$	Oil Casinghead		Condens	ite 🔲									
change of operator give name													
nd address of previous operator													
DESCRIPTION OF WELL AND LEASE Well No.   Pool Name, Including					ling Forma	ng Formation				Lease		Lease No. VB-134	
Lease Name Kiwi AKX State		6	East	Livin	gston	Rid	lge Del	awa	re State,	foliation Foliation	VB-1	34	
Location					_			210			West		
Unit Letter N	660		Feet From	m The _	outh	Line	and2	310	Fee	t From The _	WESL	Line	
	226			32		N/A	ирм.			Lea		County	
Section 16 Township			Range						<del>-</del>				
III. DESIGNATION OF TRANS	SPORTER	OFG	L AND	NAT	URAL G	AS				of this 6	orm is to be see	n/)	
Name of Authorized Transporter of Oil Enron Oil Trading & Tra	X.	or Contact	ALC-110	1 1 1	OPPO T	. (Giw Box	1188.	ΗΟι	ston,	TX 771	51-1188	-/	
		(X)	or Dry C	ias	Address	/Giv	e address io	whic	n approvea	copy of this jo	orm is to be set	u)	
Name of Authorized Transporter of Casing Yates Petroleum Corpora	ation	بما			105	Sou	ith 4th	1 St	., Art	esia, N	м 88210		
If well produces oil or liquids,	Unit	Sec.	Twp.	Rg		ctually 2.S	y connected	7	When	? 9-10-92			
give location of tanks.	<del>                                     </del>	.1					er:						
If this production is commingled with that i	rom any other	r lease or	poor, give	COHEIRE	ighting Order	20010							
		Oil Well	G	as Well	New '	Well	Workove	F	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	X			Total D	anth.	l			P.B.T.D.	l	J	
Date Spudded	Date Compl	1	8890'				8847'						
7-24-92	Name of Pro	1	Top Oil/Gas Pay				Tubing Depth						
Elevations (DF, RKB, RT, GR, etc.) 3696 GR	Del		6660'				8790 Topoth Casing Shoe						
Perforations										Beput Cash	-		
6660-8632'		·innio	CASD	IC: AN	D CEME	אידו	NG RECO	ORE	)	1 002	,,,,		
1017 0177	CAS	D CEIVIL	CEMENTING RECORD DEPTH SET				SACKS CEMENT						
HOLE SIZE	UAS		40'				Redi-Mix						
17½"	13-3/8" 8-5/8"					852'				800 sx circulated			
11"		_	4540' 8890'				980 8	980 sx circulated					
7-7/8" V. TEST DATA AND REQUES		5-1/2'	ADIT	/2-	7/8" @	87	901/						
V. TEST DATA AND REQUES OIL WELL (Test must be after t	recovery of lo	tal volume	of load	oil and m	usi be equa	1 10 01	r exceed top	allo	vable for th	is depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test				Produc	Producing Method (Flow, pump, gas lift, et Pumping							
9-6-92	9-21-92				Casing	Casing Pressure				Choke Size	Choke Size		
Length of Test	Tubing Pre		60				2"						
24 hrs Actual Prod. During Test	Oil - Bbls.	Water	Water - Bbls.				Gas- MCF						
662	10		560				71						
GAS WELL										Convity of	Condensate		
Actual Prod. Test - MCF/D Length of Test						Bbis. Condensate/MMCF					COLOCULATION		
Testing Method (pitot, back pr.)	Tubing Pro	Casing	Casing Pressure (Shut-in)				Choke Siz	Choke Size					
	ZATE O	CON	DI IAN	VCF	$\dashv \vdash \vdash$					(ATION!	חוויייי	) NI	
VI. OPERATOR CERTIFIC	ulations of the	Oil Cons	ervation		II		OILC	ON	SERV	AHON	DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above						SEP 29'92							
is true and complete to the best of my	knowledge a	ind belief.				Dat	e Appro	ove	d ——				
X X	bolli	7				D	ORIG	INA	L SIGNE!	BY JERR	Y SEKTON		
- Comment			C		-	Ву.		E	STRICT	SUPERM	C#		
Signature   Signat	<ul> <li>Produc</li> </ul>	ction	supvr	•	_								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name 9-23-92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

2) All sections of this form must be filled out for allowable on new and recompleted wells.

(505) 748-1471

Title

Telephone No.

- 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.