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

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

A.		UINA	MOFC	JAI OIL	AND NA	TUNAL G					
Operator						. وسس	Well	API No.	PI No. 025 1078 ∦		
YARBROUGH OIL LP					368	151		023 1070 p 7			
Address	n 307 f	00001				•					
BOX 1769 EUNICE, NM 88231 Reason(s) for Filing (Check proper box) X Other (Please explain)											
New Well Change in Transporter of:					La Suita (i icase capacity)						
Recompletion Dry Gas EFFECTIVE 1-1-94											
Change in Operator	Casinghead	Gas X	•								
If change of operator give name TEXACO E&P INC HOBBS, NM 88240											
II. DESCRIPTION OF WELL AND LEASE											
Lease Name			Dool No	ma laskdi	Etion	20	V:-4		of Lease No.		
E L STEELER	Well No. Pool Name, Includ STEELER 7 LANGLIE M.							of Lease Federal or Fee	Federal or Fee 802170		
Location			1 1021110	JOIL III	N C	حنها ١١٥٥	D				
Unit LetterL	:198	80	Feet Fro	m The SC	UTH Lin	e and660	0 Fe	et From The	WEST	Line	
Section 17 Township	Section 17 Township 23 Range 37				. N	мрм,			LEA County		
	<u> </u>					<u> </u>					
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
lame of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)											
INJECTOR											
Name of Authorized Transporter of Casing	thead Gas		or Dry C	305	Address (Giv	e address to wi	hich approved	copy of this for	m is to be se	nt)	
INJECTOR If well produces oil or liquids,	l Unit				1		1 110	Luna			
give location of tanks.	lomar I	Sec. [Twp. 23	ј к д е. 1 37	ls gas actually connected? YES		•	When ? 1975			
f this production is commingled with that i	rom any othe			<u></u>	l		ONE				
IV. COMPLETION DATA						·					
Designate Type of Completion	- (X)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	. Ready to	Prod.	- **-	Total Depth	l	<u> </u>	P.B.T.D.		.l	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations					L			Depth Casing	Depth Casing Shoe		
	T	UBING.	CASIN	IG AND	CEMENTI	NG RECOR	D	<u> </u>			
HOLE SIZE						DEPTH SET		S	SACKS CEMENT		
						·····					
V. TEST DATA AND REQUES											
OIL WELL (Test must be after re Date First New Oil Run To Tank	· · · · · · · · · · · · · · · · · · ·		of load o	il and must	, -				r full 24 hou	rs.)	
Date First New Oil Kun 10 1ank	Date of Test	l			Producing M	ethod (Flow, pr	ump, gas iyi, i	elc.)			
Length of Test	Tubing Dog	Tubing Purgue			Casing Press	ire		Choke Size			
	Tubing Pressure				Casing rices	110		Choke Size			
Actual Prod. During Test	During Test Oil - Bbls.				Water - Bbis.			Gas- MCF	Gas- MCF		
•											
GAS WELL	1				L			.1			
Actual Prod. Test - MCF/D	Length of Test			Bbls. Conder	mie/Mure		Tomological Co	Gravity of Condensate			
	- Louis Contract Cont			DVIS. CURGE			Giarny of Condensate				
Testing Method (pitot, back pr.)	ng Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Press	ure (Shut-in)		Choke Size	Chôke Size		
	,				(S. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.						
VI OPERATOR CERTIFIC	ATE OF	COM	TANI	CE	<u> </u>						
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation					(OIL CON	ISERV	ATION [DIVISIO	NC	
Division have been complied with and that the information given above									,,,,,,,		
is true and complete to the best of my knowledge and belief.					Date	Annrovo	ıd		11		
To the H					Date	whhiove	.u				
Van Mache faction						A	41 81				
Signature DAPTNED DAPTNED					∥ By_	UNGIN	AL SIGNED	BY JERRY	SEXTON		
PAUL PRATHER PARTNER Printed Name							UIS I RICT I	SUPERVISO	₹		
1-10-94		(50)	Title 5) 39	4-2545	Title						
Date		<u>_</u>	phone N								
			,		11						

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.