

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

NOV 26 1980

NO. OF COPIES REQUIRED	4
DISTRIBUTION	
SANTA FE FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
REGISTRATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Yates Petroleum Corporation

Address 207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well
 Recompletion
 Change in Ownership
 Change in Transporter of:
 Oil
 Coolinghead Gas
 Dry Gas
 Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Long Arroyo MQ Federal	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease NM-19181 State, Federal or Foreign Federal	Lease
Location Unit Letter <u>F</u> ; <u>1650</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>25</u> Township <u>14S</u> Range <u>27E</u> NMPM, <u>Chaves</u> Co.				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) No. Freeman, Artesia, NM 88210
Name of Authorized Transporter of Coolinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2521, Houston, TX 77001
If well produces oil or liquids, give location of tanks. Unit <u>F</u> Sec. <u>25</u> Twp. <u>14S</u> Rge. <u>27E</u>	Is gas actually connected? <u>Yes</u> When <u>11-14-80</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same as prev.	Diff.
		X	X					
Date Spudded 5-20-80	Date Compl. Ready to Prod. 7-3-80	Total Depth 8500'	P.B.T.D. 8470'					
Elevation (to, RKB, RT, GR, etc.) 3460' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 8001'	Tubing Depth 7959'					
Perforations 8140-8161', 8001-08'.			Depth Casing Shoe 8500'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	271'	425
12-1/4"	8-5/8"	1604'	840
7-7/8"	4-1/2"	8500'	650
	2-7/8"	7959'	

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed topable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 3216	Length of Test 24	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 2265#	Casing Pressure (Shut-in) Pkr	Choke Size 1/2"

CERTIFICATE OF COMPLIANCE

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 knowledge and belief.

Albert R. Stall
(Signature)

Albert R. Stall, Engineer
(Title)

Nov. 21, 1980
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 26 1980
BY W. A. Gressett
TITLE SUPERVISOR DISTRICT II

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a well on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in multi-completed wells.