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

ee Instructions

OIL CONSERVATION DIVISION

MAD " 2 YOU

DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088						THAT C	. 90		
DISTRICT III	S	anta .	Fe, New Me	xico 8/50	4-2088		4	_		
1000 Rio Brazos Rd., Aztec, NM 87410	DEOLIEST I	:OB	ALLOWAR	I F AND A	AUTHORIZ	ZATION	O. C.			
•	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
Operator	1011	ANO	TOTT OIL	/	1011/12/05	Well A	PI No.			
YATES PETROLEUM COI	RPORATION.	ч.	/		3	30-015-00	0-015-00088			
Address	d oldificativ	-								
105 South 4th St.,	Artesia, Ne	w M	exico 88	210						
Reason(s) for Filing (Check proper box)	THE CODE AT				r (Please expla	iin)				
New Well	Change	in Tran	sporter of:		GE WELL	STATUS T	O OIL WE	LL.		
Recompletion	Change in Transporter of: CHANGE WELL STATUS TO OIL WELL. Oil Dry Gas									
Change in Operator	Casinghead Gas	_ `	densate							
If change of operator give name										
and address of previous operator					· · · · · · · · · · · · · · · · · · ·					
II. DESCRIPTION OF WELL	AND LEASE							,		
Lease Name	Well No	. Poo	l Name, Includir	ng Formation			of Lease	1	ase No.	
LaRue XX Federal	1	No	rth Dagge	er Draw	Upper Pe	nn fune,	Federal of Fee	<u> NM 01</u>	4142A	
Location										
Unit LetterF	. 1980	Fee	From The	North Line	and1	980 Fe	et From The	West	Line	
Onk Detter	The second secon									
Section 3 Township	, 20S	Ran	ge 24E	, NI	MPM,		Eddy		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS										
Name of Authorized Transporter of Oil	x or Cond		لتتا	Address (Give address to which approved copy of this form is to be sent)						
Navajo Refining Co.					PO Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas X or Dry Gas							copy of this form is to be sent)			
Yates Petroleum Corpor						esia, NM 88210				
If well produces oil or liquids,	Unit Sec. Twp. Rge.			Is gas actually connected? When						
give location of tanks.	mks. F 3 20s 24e YES						10-9-89			
If this production is commingled with that f	rom any other lease of	or pool,	give commingli	ing order numi	ber:					
IV. COMPLETION DATA				, 						
	Oil We	ıl İ	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Kes'v	Diff Res'v	
Designate Type of Completion -				Take Dorah	I	J		<u>X</u>	-l	
Date Spudded RECOMPLETION	Date Compl. Ready	to Pro	1,	Total Depth			P.B.T.D. 8652			
8-1-89	8-9-89		9950'			·				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	iou	Top Oil/Gas Pay			Tubing Depth 7653'				
3749' GR	Canyon		/6/9	7679'			Depth Casing Shoe			
Perforations 77361								8997'		
7679–7736' TUBING, CASING AND CEMENTING RECORD										
	CEMENTI	DEPTH SET SACKS CEMENT								
HOLE SIZE	CASING & TUBING SIZE			543'			375 sx (in place)			
17½"	13-3/8"			3700-1377'			400 sx (in place)			
121"	9-5/8" 4½"			8997'				(in plac		
8-3/4"	2-3/8"			7653'			1	<u>. – – – – – – – – – – – – – – – – – – –</u>		
V. TEST DATA AND REQUES	T FOR ALLOY	VARI	F	<u> </u>	7033					
	, I FOR ALLOY	e of la	ad oil and must	he equal to or	exceed top all	owable for thi	s depth or be for	full 24 how	rs.)	
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test					be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)					
1-1-90	1-1-90		Flowing							
Length of Test	Tubing Pressure		Casing Press			Choke Size				
	200			_			32/64	32/64"		
24 hrs Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF			
1029	172			857			1643			
	1 1/2			<u> </u>	·					
GAS WELL				Bbls. Conder	solo AAACE		Gravity of Co	ndensate		
Actual Prod. Test - MCF/D	Length of Test			Bolk. Colider	INTERIOR OF THE PROPERTY OF TH		Cravity of Co			
	<u> </u>		Casing Pressure (Shut-in)			Choke Size				
Testing Method (pitot, back pr.)	Tubing Pressure (SI		Casing Fressure (Shut-in)							
	<u> </u>									
VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION									M	
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.				MAR 2 8 1990						
is true and complete to the best of my i	Date	Approve	d	111111						
X X										
Au anita Dodler					By ORIGINAL SIGNED BY					
Juanita Goodlett, Production Supervisor				MIKE WILLIAMS						
Printed Name Title				Title SUPERVISOR, DISTRICT IT						
2-28-90 505/748-1471										
Date	Т	clepho	ne No.							
	الكال والمساوي							استعتب		

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.