

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

APR 13 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
PRODUCTION OFFICE	

Operator
Yates Petroleum Corporation

O. C. D.
ARTESIA, OFFICE

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

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	
Recompletion ☐	
Change in Ownership ☐	
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Agave AAJ State	Well No. 1	Pool Name, including Formation Undes. Wolfcamp	Kind of Lease State, Federal or Fee State	Lease No. LG-6459
Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>32</u> Township <u>19S</u> Range <u>24E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 32	Twp. 19s	Rge. 24e	Is gas actually connected? YES	When 4-12-88

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest.	Diff. Rest.
		X	X					
Date Spudded 12-31-84	Date Compl. Ready to Prod. 5-2-85		Total Depth 8960'			P.B.T.D. 6310'		
Elevations (DE, RKB, RT, GR, etc.) 3775' GR	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 6263'			Tubing Depth 6159'		
Perforations 6263-76'				Depth Casing Shoe 8960'				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
17 1/2"	13-3/8"	265'	300
12 1/2"	8-5/8"	1130'	900
7-7/8"	5 1/2"	8960'	1400

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL (Test must be after recovery of 10% volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

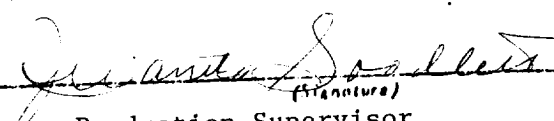
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 750	Length of Test 4 hrs	Bbls. Condensate/MCF 89	Gravity of Condensate 46+
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shot-in) 220 psi	Casing Pressure (shot-in) PKR	Choke Size 3/8"

VI. 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.


Production Supervisor

4-12-88

(Date)

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19__

BY _____

TITLE _____

This form is to be filed in compliance with RULE 11.2.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 11.1.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of conditions.

Separate Form C-104 must be filed for each pool in multiple completed wells.

OIL CONSERVATION DIVISION

P. O. BOX 7000

SANTA FE, NEW MEXICO 87501

RECEIVED

APR 13 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
LAND OFFICE	
TRANSPORTER	
OPERATION	
PRODUCTION OFFICE	

Yates Petroleum Corporation ✓

O. C. D.
ARTESIA, OFFICE

Address

105 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Agave AAJ State	1	Undes. Wolfcamp	State, Federal or Fee State	LG-6459
Location				
Unit Letter	A	660 Feet From The North	Line and 660 Feet From The East	
Line of Section	32	Township	19S	Range 24E, NMPH, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	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 ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Yates Petroleum Corporation	105 South 4th St., Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	A	32	19S	24E	YES	4-12-88

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
12-31-84	5-2-85		8960'		6310'			
Elevations (DI, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3775' GR	Wolfcamp		6263'		6159'			
Perforations					Depth Casing Shoe			
6263-76'					8960'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
17 1/2"	13-3/8"	265'	300
12 1/4"	8-5/8"	1130'	900
7-7/8"	5 1/2"	8960'	1400

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
(Test must be after recovery of 10% volume of load oil and must be equal to or exceed top oil able 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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
750	4 hrs	89	46+
Testing Method (pilot, back pr.)	Tubing Pressure (shot-in)	Casing Pressure (shot-in)	Choke Size
Back Pressure	220 psi	PKR	3/8"

VI. 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.

Production Supervisor

4-12-88

OIL CONSERVATION DIVISION

APPROVED _____, 19__

BY _____

TITLE _____

This form is to be filed in compliance with N.M.C.R. 10.2.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with N.M.C.R. 11.1.

All sections of this form must be filled out completely for all wells 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 condition.

Separate Form C-104 must be filed for each pool in multi-completed wells.

OIL CONSERVATION DIVISION

P. O. BOX 7000
SANTA FE, NEW MEXICO 87501

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR
Operator: Yates Petroleum Corporation

Address: 105 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☒	Change in Transporter of: Oil ☐ Dry Gas ☐		
Recompletion ☐	Casinghead Gas ☐ Condensate ☐		
Change in Ownership ☐			

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Agave AAJ State	Well No. 1	Pool Name, including Formation Undes. Wolfcamp	Kind of Lease State, Federal or Fee State	Lease No. LG-6459
Location Unit Letter <u>A</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>32</u> Township <u>19S</u> Range <u>24E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210
If well produces oil or liquids, give location of tanks. Unit <u>A</u> Sec. <u>32</u> Twp. <u>19s</u> Rge. <u>24e</u>	Is gas actually connected? <u>YES</u> When <u>4-12-88</u>

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☐	Gas Well ☒	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Some Res'ty. ☐	Diff. Res'ty. ☐
Date Spudded 12-31-84	Date Compl. Ready to Prod. 5-2-85	Total Depth 8960'	P.D.T.D. 6310'					
Elevations (DI, RKB, RT, GR, etc.) 3775' GR	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 6263'	Tubing Depth 6159'					
Perforations 6263-76'			Depth Casing Shoe 8960'					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
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V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

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 750	Length of Test 4 hrs	Bbls. Condensate/MCF 89	Gravity of Condensate 46+
Testing Method (pacer, back pr.) Back Pressure	Tubing Pressure (shot-in) 220 psi	Casing Pressure (shot-in) PKR	Choke Size 3/8"

VI. 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.

Juanita S. Sandoval
(Signature)
Production Supervisor
4-12-88
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19__

BY _____

TITLE _____

This form is to be filed in compliance with RULE 111.

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.

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APR 13 '88

O. C. D.
ARTESIA OFFICE

AS OF DATE	
DATE	
FILE	
LAND OFFICE	
TRANSPORTER	
OPERATION	
PRODUCTION OFFICE	

Yates Petroleum Corporation

Address

105 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

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Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

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Back Pressure	220 psi	PKR	3/8"

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4-12-88

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