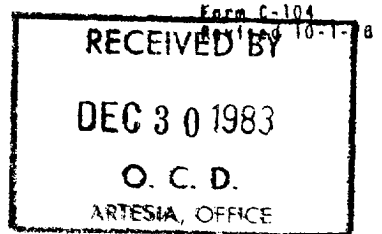


OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	☒
FILE	☒
U.S.D.S.	
LAND OFFICE	
TRANSPORTER	☒
OPERATOR	☒
PRODUCTION OFFICE	

Exxon Corporation ✓

Address

P.O. Box 1600, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Coatinghead 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.
Yates C Federal	15	Avalon (Delaware)	XXXX Federal or XXX	NM-01119
Location				
Unit Letter	M	660 Feet From The West	Line and 660 Feet From The South	
Line of Section	31	Township	20S	Range 20E
			NMPM	Eddy

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)
Permian Corporation Permian (Eff. 9/1/87)	P.O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Coastinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co.	4601 Penbrook St., Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
M 31 20S 28E	Yes 12-10-83

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 Reservoir, Diff. Hor.
XX			X				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
10-12-83	11-22-83	4930'	4645				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
3241' GR	Delaware	4422	4193				
Perforations			Depth Casing Shoe				
4422-4429'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	596'	1000 sx
11"	8 5/8"	2513'	1300 sx
7 7/8"	5 1/2"	4923'	1150 sx
	2 7/8"	4193	

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

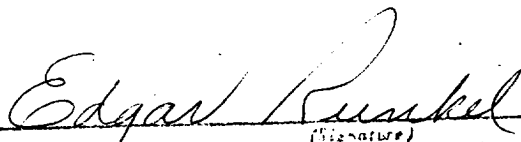
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
11-22-83	12-10-83	Flowing
Length of Test	Tubing Pressure	Casing Pressure
24 hrs.	120	18/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
	101	355
		381

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.



Unit Head

December 29, 1983

OIL CONSERVATION DIVISION

DEC 30 1983

APPROVED _____, 19

Original Signed By

BY Leslie A. Clements

TITLE Supervisor District II

This form is to be filed in compliance with RULE 100.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviating tests taken on the well in accordance with RULE 111.

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 owner, well name or number, or transporter or other such change of complete reports. Pages I-III must be filed for each pool in which completion is filed.