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JUN 11 1982

O. C. D.  
ARTESIA, OFFICE

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| LAND OFFICE            |                                     |
| TRANSPORTER            | <input checked="" type="checkbox"/> |
| OPERATOR               | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE      | <input checked="" type="checkbox"/> |
| Operator               |                                     |

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation

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

Reason(s) for filing (Check proper box)

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

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

|                                |               |   |  |           |
|--------------------------------|---------------|---|--|-----------|
| Lease Name<br>Sagebrush TY Com | Well No.<br>1 | Pool Name, including Formation<br>Pecos Slope Abo | Kind of Lease<br>State, Federal or Fee | Lease Fee |
|--------------------------------|---------------|---|--|-----------|

Location  
Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West

Line of Section 15 Township 5S Range 24E County Chaves

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil  or Condensate   
Navajo Crude Oil Purchasing Co. Address (Give address to which approved copy of this form is to be sent)  
Box 159, Artesia, NM 88210

Name of Authorized Transporter of Casinghead Gas  or Dry Gas   
Transwestern Pipeline Co. Address (Give address to which approved copy of this form is to be sent)  
Box 2521, Houston, TX 77001

If well produces oil or liquids, give location of tanks. Unit N Sec. 15 Twp. 5s Rge. 24e Is gas actually collected? Yes When approx 6-8 wks 11-10-81

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 Well, Diff. Fr. |
|  |                                       | X                                      | X                          |          |        |           |                      |
| Date Spudded<br>5-9-82                         | Date Compl. Ready to Prod.<br>6-10-82 | Total Depth<br>4133<br><del>4125</del> | P.B.T.D.<br>4079'          |          |        |           |                      |
| Elevations (DF, RKB, RT, GR, etc.)<br>3942' GR | Name of Producing Formation<br>Abo    | Top Oil/Gas Pay<br>3537'               | Tubing Depth<br>3479'      |          |        |           |                      |
| Perforations<br>3537-3822'                     |                                       |  | Depth Casing Shoe<br>4128' |          |        |           |                      |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
| 24"       | 20"                  | 80'       |              |
| 14-3/4"   | 10-3/4"              | 846'      | 700          |
| 7-7/8"    | 4-1/2"               | 4128'     | 350          |
|           | 2-3/8"               | 3479'     |              |

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 all oil well 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<br>264                    | Length of Test<br>4 hrs          | Bbls. Condensate/MMCF<br>-          | Gravity of Condensate<br>- |
| Testing Method (pilot, back pr.)<br>Back Pressure | Tubing Pressure (shut-in)<br>240 | Casing Pressure (shut-in)<br>Packer | Choke Size<br>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.

*Guarita Dosdell*  
(Signature)

Engineering Secretary

(Title)

6-11-82

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 19 1982, 19

BY Original Signed By Leslie A. Clements

TITLE Supervisor District II

This form is to be filed in compliance with rules and regulations.  
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.  
 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 name, well name or number, or transporter or other such change of condition. Separate Form C-104 must be filed for each pool in multi-

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

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NOV 15 1982

O. C. D.  
ARTESIA OFFICE

NOTICE OF GAS CONNECTION

DATE November 11, 1982

This is to notify the Oil Conservation Division that connection for the purchase of gas from the Yates Petroleum Corp Operator

Sagebrush "TY" Com.  
Lease

Well #1-Unit letter "N"  
Well Unit

15-5S-24E, Chaves County  
S.T.R.

Pecos Slope (Abo)  
Pool

Transwestern  
Name of purchaser

was made on November 10, 1982

Transwestern Pipeline Company  
Company

H. N. Aicklen, H. N. Aicklen  
Representative

Supervisor Gas Purchase Contract Administration  
Title

cc: Operator  
Oil Conservation Division - Santa Fe