

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
REGISTRATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

MAR 24 1982

O. C. D.

ARTESIA, OFFICE

Operator Yates Petroleum Corporation ✓
Address 207 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

DESCRIPTION OF WELL AND LEASE

Lease Name Witter VW Federal	Well No. 1	Pool Name, including Formation Und. Pecos Slope Abo	Kind of Lease State, Federal or Fee Federal	Lease No. NM-18962
---------------------------------	---------------	--	--	-----------------------

Location

Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East

Line of Section 34 Township 7S Range 26E, NMPM, Chaves County

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) Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead 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) Box 2521, Houston, TX 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When J 34 7S 26E Yes approx 2-4 months 4-4-84

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded 2-19-83	Date Compl. Ready to Prod. 3-27-83	Total Depth 4850'	P.B.T.D. 4776'					
Elevations (DF, RKB, RT, GR, etc.) 3767.8' GR	Name of Producing Formation Abo	Top Oil/Gas Pay 4196'	Tubing Depth 4130'					
Perforations 4196-4471'			Depth Casing Shoe 4850'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	10-3/4"	1045'	700
7-7/8"	4-1/2"	4850'	675
	2-3/8"	4130'	

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 top allowable for this depth or be for full 24 hours)

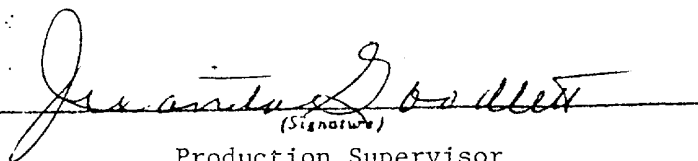
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 278	Length of Test 3 hrs	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (prior, back pr.) Back Pressure	Tubing Pressure (shot-in) 210	Casing Pressure (shot-in) Pkr	Choke Size 5/8"

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.


(Signature)

Production Supervisor

(Title)

3-28-83

(Date)

OIL CONSERVATION DIVISION

APR 09 1984

APPROVED _____, 19

BY _____

Original Signed By
Leslie A. ClementsTITLE _____
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 deepened well, this form must be accompanied by a tabulation of the deviation 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 owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED BY

APR 09 1984

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE April 5, 1984

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

Witter "VW" Fed.
Lease

P
#1 - Unit Letter ~~Unknown~~
Well Unit

34-7S-26E, Chaves County
S.T.R.

Pecos Slope (Abo)
Pool

Transwestern
Name of Purchaser

was made on 4-4-84

Transwestern Pipeline Company
Company

Rodney C. Burke Rodney C. Burke
Representative

Jr. Analyst, Contract Administration
Title

cc: Operator
Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501