

OIL CONSERVATION DIVISION

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

DESCRIPTION OF WELL AND LEASE

Lease Name: Estoril YZ Federal	Well No.: 1	Pool Name, including Formation: Pecos Slope Abo	Kind of Lease: NM-30390 Federal	Lease No.:
Location: Unit Letter: ; 1980 Feet From The South Line and 660 Feet From The East				
Line of Section: 34 Township: 4S Range: 24E, 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"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Refg. Co.	PO Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Transwestern Pipeline Co.	PO Box 1188, Houston, TX 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	I 34 4s 24e Yes 4-6-88

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 Hestv.	Diff. Hestv.
		X	X					
Date Spudded: 4-26-84	Date Compl. Ready to Prod.: 6-1-84	Total Depth: 4070'	P.B.T.D.: 3979'					
Elevations (DF, RKP, RT, GR, etc.): 4022' GR	Name of Producing Formation: Abo	Top Oil/Gas Pay: 3582'	Tubing Depth: 3530'					
Perforations: 3582-3860'	Depth Casing Shoe: 4070'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	850'	600
7-7/8"	4-1/2"	4070'	750
	2-3/8"	3530'	

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: 630	Length of Test: 4 hrs	Bbls. Condensate/M-MCF: -	Gravity of Condensate: -
Testing Method (pilot, back pr.): Back Pressure	Tubing Pressure (shut-in): 260	Casing Pressure (shut-in): PKR	Choke Size: 20/64"

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.

Guarantá Doodlett
(Signature)
Production Supervisor
(Date)
4-6-88
(Date)

OIL CONSERVATION DIVISION

APPROVED: MAY 18 1988, 19

BY: Original Signed By
Mike Williams
TITLE: Oil & Gas Inspector

This form is to be filed in compliance with RULE 1002.
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 1002.
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 Form C-104 must be filed for each pool in multiple.