

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-11  
Effective 1-1-65

RECEIVED

JUL 8 1976

G.S.		
D OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
PRORATION OFFICE		
Operator Yates Petroleum Corporation		
Address 207 South 4th Street - Artesia, NM 88210		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change In Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change In Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Other (Please explain)		
If change of ownership give name and address of previous owner		

II. DESCRIPTION OF WELL AND LEASE

Lease Name McCaw "BT"	Well No. 3	Pool Name, including Formation San Andres	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter A ; 990 Feet From The North Line and 330 Feet From The East					
Line of Section 14 Township 17S Range 25E , NMPM, Eddy County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock Oil Company	Address (Give address to which approved copy of this form is to be sent) 1216 Vaughn Bldg-Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 207 So. 4th Street-Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 14	Twp. 17S	Rge. 25E	Is gas actually connected? Yes	When 7-2-76

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Rest'y.	Diff. Rest'y.
Date Spudded 6-1-76	Date Compl. Ready to Prod. 7-2-76	Total Depth 1550'		P.B.T.D. 1518'					
Elevations (DF, RKB, RT, GR, etc.) 3488' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 1365'		Tubing Depth 1345'				
Perforations 1365-1468'				Depth Casing Shoe 1518'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
15"	10-3/4"		350'		200				
9 1/2"	7"		1200'		825				
6 1/2"	4 1/2 & 5 1/2"		1518'		150				

V. 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 7-2-76	Date of Test 7-5-76	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 15	Casing Pressure -	Choke Size -
Actual Prod. During Test 66.5	Oil-Bbls. 53.7	Water-Bbls. 12.8 LW	Gas-MCF 33.8

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitos, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*Christine Tomlinson*  
(Signature)

Christine Tomlinson-Geol. Secty

(Title)

7-7-76

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 8 1976

BY *Leelan Mermis*

TITLE OIL AND GAS INSPECTION

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.