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JAN 26 1981

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation

207 South 4th St., 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"/>
change in ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
J Lazy J	16	Eagle Creek SA	State, Federal or Fee	Fee

Section Letter J : 1650 Feet From The South Line and 1650 Feet From The EastLine of Section 22 Township 17S Range 25E , NMPM, Eddy County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Signature of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.	North Freeman, Artesia, NM 88210
Signature of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Yates Petroleum Corporation	207 S. 4th St., Artesia, NM 88210
Well produces oil or liquids, or location of tanks.	Unit <u>H</u> Sec. <u>22</u> Twp. <u>17S</u> Rge. <u>25E</u>
Is gas actually connected?	When <u>1-15-81</u>

If production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Re <input type="checkbox"/>
Date Spudded <u>12-21-80</u>	Date Compl. Ready to Prod. <u>12-26-80</u>	Total Depth <u>1500'</u>	P.B.T.D. <u>1497'</u>					
Sections (DF, RAB, RT, GR, etc.) <u>3524' GR</u>	Name of Producing Formation <u>San Andres</u>	Top Oil/Gas Pay <u>1309'</u>	Tubing Depth <u>1300</u>					
Iterations <u>1309-1434'</u>			Depth Casing Shoe <u>1160'</u>					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10-3/4"	352'	250
9-1/2"	7"	1160'	550
6-1/4"	4-1/2"	1497'	175

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 of well)
(Test must be after recovery of total volume of load oil and must be equal to or exceed top of well)

First New Oil Run To Tanks <u>1-13-81</u>	Date of Test <u>1-15-81</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pumping</u>
Length of Test <u>24 hrs</u>	Tubing Pressure <u>20#</u>	Casing Pressure <u>20#</u>
Oil Prod. During Test <u>49</u>	Oil-Bbls. <u>40</u>	Water-Bbls. <u>9</u>
		Gas-MCF <u>39</u>

S WELL

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

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 is true and complete to the best of my knowledge and belief.

Francis Goodlett
(Signature)
Engineering Secretary
(Title)
January 22, 1981
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 27 1981
BY W. A. Gussitt
TITLE 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 deep well, this form must be accompanied by a tabulation of the device 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 own well name or number, or transporter, or other such change of condition.

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