

OIL CONSERVATION DIVISION
ARTESIA, NEW MEXICO

DATE: 12/10/87

Yates Pet. Corp.

105 S. 4th

Artesia, N.M. 88210

RE: Wells placed in pools

Gentlemen:

As the result of Division Order R-8562 the following described well ~~(s)~~ ~~(have)~~ has) been placed in the pool ~~(s)~~ shown below. This change in nomenclature has been made in our files. Please change your records to reflect the proper pool name. All subsequent reports must show this nomenclature until further notice.

Eagle Creek - Strawn Gas Pool

Sherrell SR Com #1 L-32-17-26

Transporters are advised, by copy of this letter, to change their records to reflect the pool name as established by this order, effective Jan 1, 1988.

Sincerely,

Darrell Moore

Darrell Moore
Geologist

cc: Santa Fe OCD
PI
Joe Chism
Mae
Well file
Navajo
Transwestern

OIL CONSERVATION DIVISION

P. O. BOX 2000
SANTA FE, NEW MEXICO 87501JUL 23 1987
REQUEST FOR ALLOWABLE
AND
O. C. D.
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
ARTESIA, OFFICE

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANITARY	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.D.	
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>
Operator	

Yates Petroleum Corporation

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

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" 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)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease Fee
Sherrell SR Com	1	and Eagle Creek Strawn	State, Federal or Fee	FEE
Location				
Unit Letter	L	2130 Feet From The	South Line and	560 Feet From The
Line of Section	32	Township	17S	Range 26E, NMPH, Eddy 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 Refining 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 2521, Houston, TX 77001					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	L	32	17S	26E	Yes	7-22-87

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't.	Diff. Res't.
		X				X		X
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7-15-87	7-20-87	8700'	8365'					
Elevations (D.F., R.H., RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3396' GR	Strawn	8063'	7990'					
Perforations			Depth Casing Shoe					
8063-8119-1/2'			8700'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20"	40'	
17-1/2"	13-3/8"	353'	350 sx
12-1/4"	8-5/8"	1293'	1000 sx
7-7/8"	5-1/2"	8700'	575 sx
	2-7/8"	7990'	

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

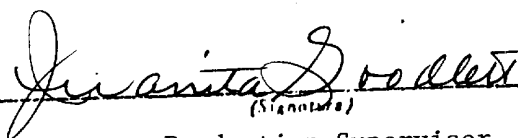
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		7-24-87	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			crimp, Strawn
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
486	24 hrs		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	320 psig	Pkr	1/4"

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

7-22-87

(Date)

OIL CONSERVATION DIVISION

JUL 24 1987

APPROVED _____, 19

Original Signed By
BY _____
Lep A. ClementsTITLE _____
Supervisor District II

This form is to be filed in compliance with RULE 111.

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 Form C-104 must be filled for each pool in multiple completed wells.