

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

Drawer DD Artesia, NM.

DISTRICT OFFICE #2

Jan. thru April 1983
NO. 2045 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE January 7, 1983

PURPOSE ALLOWABLE ASSIGNMENT - NEW WELL

Effective January 1, 1983 an allowable of 50 barrels of oil per day
is hereby assigned to Yates Petroleum Corporation, Morris Estate "CC"
#6-M-14-17-25 in the Eagle Creek San Andres Pool.

THIS WELL IS ON THE SAME UNIT AS #1, #3, & #5

Jan. Total - 1550 bbls.	Total Unit Allowable for Jan. - 2480 bbls.
Feb. Total - 1400 bbls.	Total Unit Allowable for Feb. - 2240 bbls.
Mar. Total - 1550 bbls.	Total Unit Allowable for Mar. - 2480 bbls.
Apr. Total - 1500 bbls.	Total Unit Allowable for Apr. - 2400 bbls.

L - P

MP - P

LAC:fc

Yates Pet. Corp.

NCO

OIL CONSERVATION DIVISION


DISTRICT SUPERVISOR

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

REGISTRATION	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
REGISTRATION OFFICE	<input checked="" type="checkbox"/>

Yates Petroleum Corporation ✓

JAN 05 1983

Address 207 South 4th St., Artesia, NM 88210

O. C. D.
ARTESIA, OFFICE

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)

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 No.
Morris Estate CC	6	Eagle Creek SA	State, Federal or Fee Fee	

Location

Unit Letter M ; 990 Feet From The South Line and 990 Feet From The West
Line of Section 14 Township 17S Range 25E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name 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.	Box 159, Artesia, NM 88210
Name 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 So. 4th St., Artesia, NM 88210
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	M 14 17s 25e Yes 12-24-82

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 <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. Res'v. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
11-29-82	12-24-82	1500'	1485'					
Locations (DE, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3499' GR	San Andres	1255'	1226'					
Perforations			Depth Casing Shoe					
1255-1434'			1490'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	10-3/4"	350'	225
9-7/8"	7"	1162'	663
6-1/4"	4-1/2"	1490'	200
	2-3/8"	1226'	

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 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.)	
12-20-82	12-24-82	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	25#	25#	2"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
64	51	13	43

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (piston, 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 above is true and complete to the best of my knowledge and belief.

Production Supervisor

1-3-83

(Date)

OIL CONSERVATION DIVISION

JAN 07 1983

APPROVED _____, 19____

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 multiple completed wells.