

RECEIVED

JAN 05 1983

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

OPERATOR	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

Yates Petroleum Corporation

Address

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)

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.
Winters DN	4	Eagle Creek SA	State, Federal or Fee Fee	
Location				
Unit Letter	P	990 Feet From The	South Line and	330 Feet From The
Line of Section	14	T. 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 S. 4th, Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	14	17s	25e	Yes	12-26-82

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
11-14-82	12-26-82	1500'	1490'					
Elevations (DF, HKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3466' GR	San Andres	1223'	1259'					
Perforations			Depth Casing Shoe					
1223-1471'			1492'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	20"	35'	
14-3/4"	10-3/4"	350'	225
9-7/8"	7"	1156'	700
6-1/4"	4-1/2"	1492'	200
		1259'	

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.)	
12-24-82	12-26-82	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	25#	25#	Open
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
70	56	14	45

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, 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

APPROVED JAN 07 1983

BY Leslie A. Clements
Supervisor District II

TITLE

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