

OIL CONSERVATION DIVISION

P. O. BOX 2000
SANTA FE, NEW MEXICO 87501

RECEIVED

JUL 08 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

Operator
Yates Petroleum Corporation ✓

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

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:
Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)
Convert WIW to producing oil well.
5-23-88.

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gissler AV	Well No. 37	Pool Name, Including Formation Eagle Creek SA	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>23</u> Township <u>17S</u> Range <u>25E</u> , NMPM, <u>Eddy</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 105 So. 4th, Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 23	Twp. 17s	Rge. 25e	Is gas actually connected? Yes	When 5-24-88

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 ☒	Gas Well ☐	New Well ☐	Workover ☒	Deepen ☐	Plug Back ☐	Same Res'n. ☐	Diff. Res'n. ☐
Date Spudded 9-13-83	Date Compl. Ready to Prod. after converting 6-24-88		Total Depth 1530'		P.B.T.D. 1517'			
Elevations (DI, RKH, RT, GR, etc.) 3500' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 1280'		Tubing Depth 1381'			
Perforations 1280-1409'					Depth Casing Shoe 1530'			

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	Redi-Mix
14-3/4"	10-3/4"	386'	225
9-7/8"	7"	1167"	750
6-1/4"	4-1/2"	1530'	160
	2-3/8"	1381'	

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 200 bbl. for this depth or be for full 24 hours)

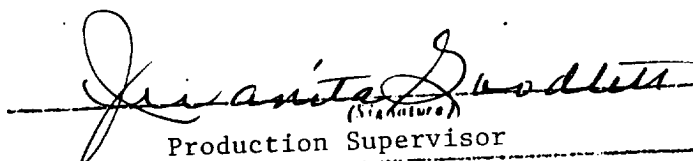
Date First New Oil Run To Tanks 6-24-88	Date of Test 6-24-88	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 30#	Casing Pressure 30#	Choke Size Open
Actual Prod. During Test 12	Oil - Bbls. 1	Water - Bbls. 11	Gas - MCF 2 (estimated)

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pump, 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 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
(Date)
7-7-88

OIL CONSERVATION DIVISION

APPROVED JUL 11 1988, 19
Original Signed By
BY Mike Williams
TITLE Oil & Gas Inspector

This form is to be filed in compliance with N.M.C. 199.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with N.M.C. 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 well name or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each pool in multi-completed wells.