



NEW MEXICO
OIL CONSERVATION COMMISSION

P. O. DRAWER DD
ARTESIA, NEW MEXICO

Sept. thru Dec. 1974

No. 21291 R

SUPPLEMENT TO THE OIL PRODUCTION SCHEDULE

DATE 10/10/74

PURPOSE ALLOWABLE REVISION (Waterflood)

Effective 10/1/74, the Allowables of the following Yates Drilling Co., wells in the pool listed below are hereby revised as indicated.

Artesia

Artesia Water Unit #33, 34-B, 30-18-28, increased to 4 BOPD.	Oct. total, 124 bbls
	Nov. " , 120 "
	Dec. " , 124 "
" " " #55-B, 35-18-27, increased to 2 BOPD.	Oct. " , 62 "
	Nov. " , 60 "
	Dec. " , 62 "
" " " #57-B, 36-18-27, increased to 3 BOPD.	Oct. " , 93 "
	Nov. " , 90 "
	Dec. " , 93 "

Further, effective 10/1/74, an allowable of 4 BOPD is hereby assigned to Yates Drig. Co. Artesia Water Unit #15-X, 19-18-28.

Oct. total, 124 bbls
Nov. " , 120 "
Dec. " , 124 "

WAG:jw

Yates Drig. Co.

ENC

OIL CONSERVATION COMMISSION

W.A. Lunsford
Supervisor, District No. 2

EXTRA COPY

NEW MEXICO
OIL CONSERVATION COMMISSION
P. O. BOX 100
ALBUQUERQUE, NEW MEXICO

STATEMENT TO THE OIL PRODUCTION SCHEME

DATE

PURPOSE

The purpose of this statement is to provide information regarding the oil production scheme in the State of New Mexico.

The oil production scheme in the State of New Mexico is a complex system involving the extraction, processing, and distribution of oil.

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NEW MEXICO OIL CONSERVATION COMMISSION

NUMBER COPIES RECEIVED		4
DISTRIBUTION		
SANTA FE		
FILL		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

DEC 12 1973

Operator		Yates Drilling Company		O. C. C. ARTESIA, OFFICE	
Address 207 So. 4th St., Artesia, N.M. 88210					
Reason(s) for filing (Check proper box)			Other (Please explain)		
New Well	<input type="checkbox"/>	Change in Transporter of:	Change name from:		
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/>	Rotary St. #2 to:		
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Well 33		
		Dry Gas <input type="checkbox"/>			
		Condensate <input type="checkbox"/>			

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Artesia Metex Unit	Well No.	33	Pool Name, including Formation	Artesia	Kind of Lease	State, Federal or Fee	State	Lease No.	647-339
Location										
Unit Letter	B	330	Feet From The	North	Line and	2310	Feet From The	East		
Line of Section	30	Township	18S	Range	28 E	NMPM,	Eddy	County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Navajo Refining Co. - Pipeline Div.		Address (Give address to which approved copy of this form is to be sent)		N. Freeman, Artesia, N.M. 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	B	30	18S	28E		

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'v.	Diff. Res'v.
	X							
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 top allowable for this depth or be for full 24 hours)

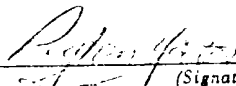
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

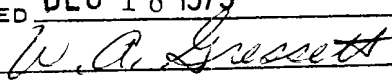
VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Engineer

AUG 31, 1973
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 18 1973
BY 
TITLE OIL AND GAS INSPECTOR

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 multiply