

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

SEP 16 1985

O. C. D.
ARTESIA, OFFICE

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Harvey E. Yates Company

Address
Box 1933, Roswell, NM 88201

Reason(s) for Filing (Check proper box)

New Well ☐
Recompletion ☒
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 10-25-85UNLESS AN EXCEPTION FROM
THE B. L. M. IS OBTAINEDIf 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.				
Mesquite 3	1	Undesignated Bone Springs	State, Federal or Fee Federal	LC029388D				
Location	Unit Letter	D	660 Feet From The North Line and 660 Feet From The West					
Line of Section	3	Township	18-S	Range	31-E	NMPM	Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Navaio Refining Company	Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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
	D	3	18-S	31-E		

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)	Oil Well ☒ Gas Well ☐	New Well ☐ Workover ☐ Deepen ☐	Plug Back ☒ Some Restv. ☐ Diff. Restv. ☒
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-22-67	9-09-85	13016'	8296'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3751.7' (GL)	Bone Springs	7723'	8035'
Perforations			Depth Casing Shoe
7723-7935', 8080-8258'			12016'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	736'	700 Post 10-2
12-1/2"	9-5/8"	4800'	950 9-27-85
7-7/8"	5-1/2"	12016'	1200 Comp BS
	2-3/8" tbg	8035'	

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.)
9-09-85	9-09-85	Pump
Length of Test	Tubing Pressure	Casing Pressure
24 hr		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
	39	65

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.

Asst. Engineer

9-13-85

OIL CONSERVATION DIVISION

SEP 24 1985

APPROVED

Original Signed By
Les A. Clements

TITLE 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 deepen 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 all wells on new and re-completed wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, together with change of condition.

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