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LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
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PRODUCTION 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-11
Effective 1-1-65

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JAN 25 1979

Operator Yates Petroleum Corporation ✓	
Address 207 South Fourth Street - Artesia, NM 88210	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change In Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change In Ownership <input type="checkbox"/>	Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name O'Neil "JL"	Well No. 1	Pool Name, Including Formation Atoka Yeso	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter G ; 2310 Feet From The North Line and 1650 Feet From The East Line of Section 33 Township 18S Range 26E, 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"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave. - Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 207 So. 4th St. - Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 33	Twp. 18S	Rge. 26E	Is gas actually connected? yes	When 1-24-79

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 11-30-78	Date Compl. Ready to Prod. 1-19-79	Total Depth 3150'		P.B.T.D. 3039'					
Elevations (DF, RKB, RT, GR, etc.) 3374' GR; 3383' KB	Name of Producing Formation Yeso	Top Oil/Gas Pay 2741'		Tubing Depth 2725'					
Perforations 2741-2868'				Depth Casing Shoe 3040'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9-1/2"	7-1/4"	1116'	400 sacks
6-1/4"	5 1/2 & 4 1/2"	3040'	275 sacks
	2-3/8"	2725'	

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 1-19-79	Date of Test 1-24-79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 30	Casing Pressure 30	Choke Size 2"
Actual Prod. During Test - 145	Oil-Bbls. 27 BO	Water-Bbls. 118 BW	Gas-MCF 28 MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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 Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Christine L. Ambruso
(Signature)

Geological Secretary
(Title)

1-20-78
(Date)

OIL CONSERVATION COMMISSION

JAN 26 1979

APPROVED _____, 19_____
BY *W. A. Gussert*

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 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.