

OIL CONSERVATION DIVISION

P. O. BOX 2668

SANTA FE, NEW MEXICO 87501

RECEIVED

MAY 7 1981

O. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation ✓

Address

207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

Change in Transporter of:  
Oil ☐ Dry Gas ☐  
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Olsen MY	1	Atoka-Yeso	State, Federal or Fee Fee	

Location

Unit Letter I 2310 Feet From The South Line and 940 Feet From The East

Line of Section 33 Township 18S Range 26E, NMPM, Eddy County

SIGNATURE 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.	P.O. 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 South 4th St., Artesia, NM 88210

Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	I	33	18s	26e	Yes	3-16-81

Is production 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 Res.	Off. Res.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2-6-81	4-25-81		3100'		3079'			
Formations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3361' GR	Yeso		2736-1/2'		2673'			
Formations					Depth Casing Shoe			
2736-1/2' 3036'					3079'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10-3/4"	314'	450
9-1/2"	7"	1130'	950
6-1/4"	4-1/2"	3079'	370
	2-7/8"	2673'	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-24-81	4-30-81	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	20#	20#	
Vol Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
93	20	73	12 + Comp. 4PC

SHUT-IN WELL

Vol 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 is true and complete to the best of my knowledge and belief.

*Marita Goodwin*  
(Signature)

Engineering Secretary  
(Title)

6-81

(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 12 1981  
BY *W. A. Gressitt*  
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 deviated 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 multiple-completed wells.