

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

AUG 21 1981

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation ✓

207 South 4th St., Artesia, NM 88210

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)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Federal AB	Well No. 9	Pool Name, including Formation Penasco Draw SA-Yeso Assoc.	Kind of Lease NM-0487738 State, Federal or Fee Federal	Lease No.
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Location

Unit Letter N : 330 Feet From The South Line and 2310 Feet From The WestLine of Section 32 Township 18S Range 25E , 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 Co.	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210
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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 South 4th St., Artesia, NM 88210
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If well produces oil or liquids, give location of tanks.	Unit M	Sec. 32	Twp. 18S	Rge. 25E	Is gas actually connected? Yes	When 8-8-81
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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 7-6-81	Date Compl. Ready to Prod. 8-4-81		Total Depth 2900'		P.B.T.D. 2867'			
Drillings (DF, RKB, RT, GR, etc.) 3592' GR	Name of Producing Formation Yeso		Top Oil/Gas Pay 2331'		Tubing Depth 2300'			
Perforations 2331-2801'					Depth Casing Shoe 2872'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	10-3/4"	370'	320
9-1/2"	7"	1006'	1100
6-1/4"	4-1/2"	2872'	350
	2-3/8"	2300'	

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)

Date First New Oil Run To Tanks 8-4-81	Date of Test 8-8-81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 20#	Casing Pressure 20#	Choke Size Open
Actual Prod. During Test 46	Oil-Bbls. 32 2/3	Water-Bbls. 12	Gas-MCF 62

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)
Engineering Secretary(Title)
August 17, 1981

(Date)

OIL CONSERVATION DIVISION

SEP 1 1981

APPROVED _____, 19

BY W. A. Dressett
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 all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

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