

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

MAR 04 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF WELLS	
DISTRIBUTION	
AREA	
USE	
PROD.	
AND OFFICE	
RESPONSIBLE	
OPERATION	
PRODUCTION OFFICE	
GENERAL	

Yates Petroleum Corporation

O. C. D.
ARTESIA, OFFICE

Address
105 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Lease Name	1	East Eagle Creek	Morrow	State, Federal or Fee	Fee
Location					
Unit Letter	A	660	Feet From The North	Line and	660
Line of Section	12	Township	18S	Range	25E
				NMPM,	Eddy
				County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Navajo Refg. Co.	PO Box 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 1188, Houston, TX 77001	
If well produces oil or liquids, give location of tanks.	Unit A Sec. 12 Twp. 18s Rge. 25e	Is gas actually connected?	When YES 3-2-88

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

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest.	Diff. Rest.
Designate Type of Completion - (X)			X	X					
Date Spudded 9-24-83	Date Compl. Ready to Prod. 11-12-83	Total Depth 8785'		P.B.T.D. 8722'					
Elevations (DF, RKB, RT, GR, etc.) 3437' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 8514'		Tubing Depth 8469'					
Perforations 8514-8531'				Depth Casing Shoe 8785'					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	358'	360
12-1/4"	8-5/8"	1282'	1085
7-7/8"	4-1/2"	8785'	2150
	2-3/8"	8469'	

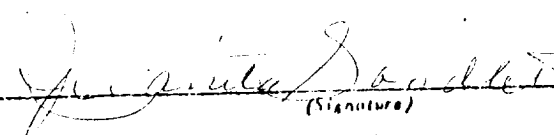
TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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		Bbls. Condensate/MCF	Gravity of Condensate
Actual Prod. Test-MCF/D 490	Length of Test 6 hrs		
Testing Method (prior, back pr.) Back Pressure	Tubing Pressure (shut-in) 320	Casing Pressure (shut-in) PKR	Choke Size 1/4"

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)
Production Supervisor
3-2-88
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 05 1988, 19
BY Original Signed By
Mike Williams
TITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 111.
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 logs 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 conditions.
Form C-104 must be filed for each pool in multiply