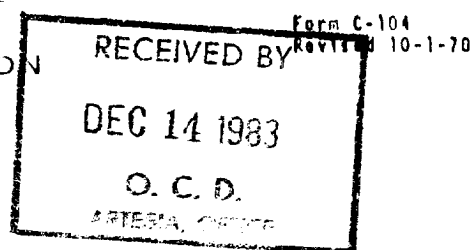


OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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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)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Platt PA	Well No. 8	Pool Name, Including Formation Atoka Yeso	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter N	430	Feet From The South	Line and 2260	Feet From The West
Line of Section 26	Township 18S	Range 26E	N.M.P.M. Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 207 S. 4th, Artesia, NM 88210	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Yes When 12-12-83

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 ☒ Gas well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Some Tests ☐ Diff. Test ☐		
Date Spudded 10-11-83	Date Compl. Ready to Prod. 12-12-83	Total Depth 3800'	P.B.T.D. 3794'
Elevations (DF, RAB, RT, GR, etc.) 3310' GR	Name of Producing Formation Yeso	Top Oil/Gas Pay 2827'	Tubing Depth 2707'
Perforations 3276-3501; 2827-3124'			Depth Casing Shoe 3800'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	978'	800
6-1/4"	5-1/2"	3800'	575
	2-7/8"	2707'	

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 12-6-83	Date of Test 12-12-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 50#	Casing Pressure 50#	Choke Size 2"
Actual Prod. During Test 175	Oil-Bbls. 25	Water-Bbls. 150	Gas-MCF 30

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.

Production Supervisor

(Date)

12-13-83

(Date)

OIL CONSERVATION DIVISION

DEC 15 1983

APPROVED _____, 19

BY _____
Original Signed By
Leslie A. Clements
Supervisor District II

TITLE _____

This form is to be filed in compliance with RULE 1102.

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 conditions.

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