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PRODUCTION OFFICE	

RECEIVED BY
OCT 7 1985
O. C. D. REQUEST FOR ALLOWABLE
ARTESIA, OFFICE AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR
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

II. DESCRIPTION OF WELL AND LEASE
Lease Name Boykin ACV Com Well No. 1 Pool Name, including Formation Atoka Glorieta Yeso Kind of Lease State, Federal or Fee Fee
Location
Unit Letter D : 330 Feet From The North Line and 990 Feet From The West
Line of Section 34 Township 18S Range 26E, NMPL, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Refining Co. Address (Give address to which approved copy of this form is to be sent)
PO 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 South 4th St., Artesia, NM 88210
If well produces oil or liquids, give location of tanks. Unit D Sec. 34 Twp. 18s Rge. 26e Is gas actually connected? Yes When 9-24-85

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

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well X Gas Well New Well X Workover Deepen Plug Back Same Res'v. Diff. Res'
Date Spudded 7-22-85 Date Compl. Ready to Prod. 10-1-85 Total Depth 3750' P.B.T.D. 3681'
Elevations (DI, RKB, RT, GR, etc.) 3377' GR Name of Producing Formation Yeso Top Oil/Gas Pay 2782' Tubing Depth 3351'
Perforations 2782-3623' Depth Casing Shoe 3745'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 8-5/8" 918' 550
7-7/8" 5-1/2" 3745' 525
2-7/8" 3351'

V. 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 all-able for this depth or be for full 24 hours)
Date First New Oil Run To Tanks 9-13-85 Date of Test 10-1-85 Producing Method (Flow, pump, gas lift, etc.) Pumping
Length of Test 24 hrs Tubing Pressure 30 Casing Pressure 30 Choke Size Open
Actual Prod. During Test 304 Oil-Bbls. 25 Water-Bbls. 279 Gas-MCF 31
Post FD-2 10-18-85 Camp + BK

GAS WELL
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (prior, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

VI. 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
10-4-85
(Date)

OIL CONSERVATION DIVISION
APPROVED OCT 17 1985
BY Original Signed By Les A. Clements
TITLE Supervisor District II
This form is to be filed in compliance with RULE 100.
If this is a request for allowable for a newly drilled or deeper 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 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 Form C-104 must be filed for each pool in multi-