

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

NOV 28 1993

I.

Operator YATES PETROLEUM CORPORATION	Well API No. 30-015-27488
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Beauregard ANM State Com	Well No. 1	Pool Name, Including Formation Und. Red Lake Atoka/Morrow	Kind of Lease State, Federal or Fee	Lease No. VB 414
Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>14</u> Township <u>18S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Refining Company	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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Company	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 L	Sec. 14	Twp. 18S	Rge. 27E	Is gas actually connected? YES	When? 11-19-93

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 7-24-93	Date Compl. Ready to Prod. 10-11-93		Total Depth 10100'		P.B.T.D. 10013'			
Elevations (DF, RKB, RT, GR, etc.) 3475' GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 9633'		Tubing Depth 9558'			
Perforations 9633-9638'					Depth Casing Shoe 7559'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		40'		Redi-Mix			
17 1/2"	13-3/8"		370'		750 sx + Redi-Mix			
12 1/2"	9-5/8"		2190'		850 sx - circulated			
8-3/4"	7"		7559'		300 sx			
6-1/8"	4 1/2" Liner		7304-10095'		365 sx			

V. TEST DATA AND REQUEST FOR ALLOWABLE /2-3/8" set @ 9558'/
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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 1-7-94
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF comp & BK

GAS WELL

Actual Prod. Test - MCF/D 650	Length of Test 7 hrs	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 160 psi	Casing Pressure (Shut-in) PKR	Choke Size 3/8"

VI. OPERATOR 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.

Juanita Goodlett
Signature
Juanita Goodlett - Production Supervisor
Printed Name
11-22-93
Date
505/748-1471
Telephone No.

OIL CONSERVATION DIVISION

NOV 26 1993

Date Approved

By MIKE WILLIAMS
ORIGINAL SIGNED BY
SUPERVISOR, DISTRICT II
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.