

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

REQUEST FOR (OIL) - () ALLOWABLE

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico

February 24, 1961

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Western-Yates

State 648

Well No. 167

in NE

NE

(Company or Operator)

(Lease)

A

Sec. 22

T

19-S

R

28-E

NMPM

E. Millman

(Seven Rivers)

Pool

Unit Letter

Eddy

County. Date Spudded. 12-29-60

Date Drilling Completed 1-10-61

Please indicate location:

Elevation 3419' GL

Total Depth 1247'

PBTD 1190'

Top Oil/Gas Pay 1130'

Name of Prod. Form. Seven Rivers

PRODUCING INTERVAL -

Perforations 1130'-40', 1146'-47', 1174'-78'

Open Hole None

Depth

Casing Shoe 1246'

Depth

Tubing 1128'

OIL WELL TEST -

Natural Prod. Test: 27 bbls. oil, 0 bbls water in 3 hrs, 0 min. Size Bailin

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 49 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 20/64"

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): SOF using 38,700 lbs. sand & 761 barrels lease crude.

Casing Press. 160 Tubing Press. 80 Date first new oil run to tanks February 22, 1961

Oil Transporter Continental Pipeline Company

Gas Transporter None

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved FEB 28 1961, 19

Western-Yates

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

M. L. Armstrong

By:

R. J. Harens

(Signature)

Title:

Engineer

Send Communications regarding well to:

Title

OIL AND GAS INSPECTOR

Name:

Western-Yates

P. O. Box 427. Artesia, New Mexico

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ARTESTA DISTRICT OFFICE		
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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

(File the original and 4 copies with the appropriate district office)

RECEIVED
Form 27-1861
Revised 7/1/55
O. C. C.
ARTESIA, OFFICE

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Western-Yates Lease State 648
Well No. 167 Unit Letter A S 22 T 19-S R 28-E Pool E. Millman (Seven Rivers)
County Eddy Kind of Lease (State, Fed. or Patented) State
If well produces oil or condensate, give location of tanks: Unit A S 22 T 19-S R 28-E
Authorized Transporter of Oil or Condensate Continental Pipeline Company
Address Artesia, New Mexico
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas None
Address _____ Date Connected _____
(Give address to which approved copy of this form is to be sent)
If Gas is not being sold, give reasons and also explain its present disposition:
Gas connection not completed. Gas is presently being flared.

Reasons for Filing: (Please check proper box) New Well _____ (X)
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership _____ () Other _____ ()
Remarks: _____ (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of February 19 61

Approved FEB 28 1961 19 _____

OIL CONSERVATION COMMISSION
By M. L. Armstrong
Title OIL AND GAS INSPECTOR

By B. J. Aronson
Title Engineer
Company Western-Yates
Address P. O. Box 427
Artesia, New Mexico

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