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OIL CONSERVATION DIVISION
RECEIVED BY P. O. BOX 2000
SANTA FE, NEW MEXICO 87501
JUL 15 1987
O. C. D. REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation

Address

105 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

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

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Foster AN Com	1	South Dagger Draw Upper Penn	State, Federal or Fee	Fee
Location				
Unit Letter	D	660 Feet From The North Line and	660 Feet From The West	
Line of Section	1	Township	20S	Range
			24E	NMPM,
				Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Co.	PO Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Yates Petroleum Corporation	105 So. 4th St., Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	D	1	20S	24E	Yes	7-14-87

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't.	Diff. Res't.
	X							X
Date Spudded	RECOMPLETION	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
5-19-87		7-13-87	8240'	7585'				
Elevations (D.F., R.R.H., R.T., G.R., etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3624' GR	Canyon	7754'	7700'					
Perforations			Depth Casing Shoe					
7754-7790'			7873'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-3/4"	9-5/8"	1065'	600
8-3/4"	7"	7873'	340
	2-7/8"	7700'	

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)
7-1-87	7-13-87	Pumping
Length of Test	Tubing Pressure	Casing Pressure
24 hrs	140	50
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
1449	134	1315
		Choke Size
		2"
		Gas-MCF
		285

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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.

J. Santa Dooder
(Signature)
Production Supervisor

7-14-87

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 21 1987

BY Original Signed By
Les A. Clement

TITLE Supervisor District II

This form is to be filed in compliance with RULE 110.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate 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 condition.

Separate Form C-104 must be filed for each pool in multiple well.