

RECEIVED

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O. C. D.
ARTESIA, OFFICE

DATE OF FILING	
DISTRICT	
COUNTY	
WELL NO.	
SECTION	
TOWNSHIP	
RANGE	
DEPT.	
OFFICE	
TRANSPORTER	
OPERATOR	
LOCATION OFFICE	
ADDRESS	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation

207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)	Other (Please explain)
Well Completion ☒	
Change in Ownership ☐	
Change in Transporter of: Oil ☐ Gas ☐ Casinghead Gas ☐ Condensate ☐	

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Eastern Shore OV Federal	1	Wildcat	NM-13073 State, Federal or Fee Federal	
Location	Correl			
Unit Letter	B	Feet From The	North	Line and
	660		1980	Feet From The
			East	
Line of Section	17	Township	19S	Range
			27E	NMPM, Eddy
				County

SIGNATURE 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 Crude Oil Purchasing Co.	P.O. Drawer 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)					
Transwestern Pipeline Co.	P.O. Box 2521, Houston, TX 77001					
Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	B	17	19S	27E	Yes	Approx 4-6 wks 8-25-81

If 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	Same Res.	Test. Res.
		X	X					
Date Spudded	Date Compl. ready to Prod.	Total Depth	P.B.T.D.					
2-12-81	4-10-81	10250'	10191'					
Locations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3350' GR	Morrow	9908'	9871'					
Locations			Depth Casing Shoe					
			10216'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	335'	350
12-1/4"	9-5/8"	2300'	940
7-7/8"	5-1/2"	10216'	900
	2-7/8"	9871'	

TEST DATA AND REQUEST FOR ALLOWABLE
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)

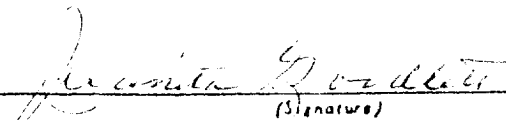
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

SHUT-IN WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
385	1/2 hr	-	-
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	1280#	Packer	3/4"

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 is true and complete to the best of my knowledge and belief.


(Signature)
Engineering Secretary
(Title)
4-13-81
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 1 1981, 19
BY W. A. Gussitt
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepens 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 Forms C-104 must be filed for each pool in multiple completed wells.