

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED BY
SEP 25 1986REQUEST FOR ALLOWABLE
ANDO.C.D.
AUTORIZATION TO TRANSPORT OIL AND NATURAL GAS
ARTESIA, OIL FIELD

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 ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Molly QD Com	1	N. Dagger Draw u/PENN ASSOC.	State, Federal or Fee Fee	
Location				
Unit Letter	P	660 Feet From The South Line and 660 Feet From The East		
Line of Section	13	Township 19S	Range 25E	NMPM, Eddy County

II. 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 South 4th St., Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	13	19s	25e	Yes	9-19-86

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

C. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Hole	Diff. Hole
X	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
6-26-86	9-23-86		9212'			9154'		
Elevations (DI, RHH, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
3601' GR	Canyon		7813'			7728'		
Perforations			Depth Casing Shoe			9212'		
7813-30'								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	
17 1/2"	13-3/8"	395'	821
12 1/4"	8-5/8"	1100'	700
7-7/8"	5 1/2"	9212'	1285
	2-7/8"	7728'	

D. 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.)	
8-13-86	9-23-86	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	100#	-	48/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
639	259	380	558

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shot-in)	Casing Pressure (Shot-in)	Choke Size

E. 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

9-24-86

(Date)

OIL CONSERVATION DIVISION

OCT 10 1986

APPROVED _____, 19__

BY _____
Original Signed By
Les A. ClementsTITLE _____
Supervisor District II

This form is to be filed in compliance with RULE 1100.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation 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 completions.