

OIL CONSERVATION DIVISION

Drawer DO Artesia, N.M.

DISTRICT OFFICE II

June thru December 1990
NO. 2137 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE August 24, 1990

PURPOSE ALLOWABLE ASSIGNMENT - NEW OIL

Effective August 1, 1990 an allowable for a marginal well (M) is hereby assigned to Yates Pet. Corp., Boden CD Federal #6-E-35-19-24 in the North Dagher Draw Upper Penn Pool.

L - F

MP - P

MW/mm

Yates Pet. Corp.

NRC

YPC

OIL CONSERVATION DIVISION



DISTRICT SUPERVISOR

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

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

AUG 17 '90

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

Operator YATES PETROLEUM CORPORATION ✓	Well API No. 30-015-26337
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
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 checked="" type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Roden GD Federal	Well No. 6	Pool Name, Including Formation North Dagger Draw Upper Penn	Kind of Lease /State, Federal or Fed	Lease No. NM 26864
Location				
Unit Letter H	: 1980	Feet From The North	Line and 660	Feet From The East
Section 35	Township 19S	Range 24E	NMPM, Eddy County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Navajo Refining Co. <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	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 Yates Petroleum Corporation <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 35	Twp. 19s	Rge. 24E
Is gas actually connected? Yes		When ? 7-21-90		

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 6-4-90	Date Compl. Ready to Prod. 8-12-90		Total Depth 8058'		P.B.T.D. 8000'			
Elevations (DF, RKB, RT, GR, etc.) 3646' GR	Name of Producing Formation Canyon		Top Oil/Gas Pay 7698'		Tubing Depth 7648'			
Perforations 7698-7760'					Depth Casing Shoe 8058'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		40'		Redi-Mix			
14-3/4"	9-5/8"		1270'		1470 sx			
8-3/4"	7"		8058'		2050 sx			
	2-7/8"		7648'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

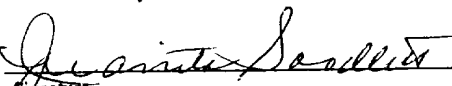
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank 7-21-90	Date of Test 8-12-90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 200	Casing Pressure 300	Choke Size 2"
Actual Prod. During Test 1083	Oil - Bbls. 88	Water - Bbls. 995	Gas - MCF 1357

GAS WELL

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

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.


Signature
Juanita Goodlett - Production Supvr.
Printed Name
8-16-90
Date
(505) 748-1471
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 24 1990

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.