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## State of New Mexico Energy, Minerals and Natural Resources Department

## RECEIVED

APR - 4 1991 See Instructions
APR - 4 1991 at Bottom of Page

O. C. D.

## OIL CONSERVATION DIVISION

<u>DISTRICT II</u> P.O. Drawer DD, Arlesia, NM 88210	P.O. Box 2088										
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWABLE AND AUTHORIZATION										
TO TRANSPORT OIL AND N						URAL G	AS Well A	PI No	<del> </del>		
Operator YATES PETROLEUM CORPORATION   VALUE OF THE PROPERTY O									015-26632		
Address 105 South 4th St.,	Artesia	a, NM	8821	0							
Reason(s) for Filing (Check proper box)					Othe	t (Please expl	ain)				
New Well XX		Change in	-	[]							
Recompletion	Oil	_	Dry Gas								
Change in Operator	Casinghea	d Gas	Condens	ate	····						
If change of operator give name and address of previous operator		·····					··········				
II. DESCRIPTION OF WELL Lease Name	Well No.	Pool Na	me. Includi	g Formation Kind of			of Lease	Lease No.			
Judith AIJ Federal		1 South Dagg			er Draw	Upper Pe	enn /s/a/e,	State, Federal or/Fed NM 39121		39121	
Location Unit Letter P	. 560		East Em	m The _S	outh line	and56	). Fe	et From The	East	Line	
		<del></del>							Eddy		
Section 9 Townshi	p20S_		Range	24E	, NI	ирм,		E		County	
III. DESIGNATION OF TRAN	SPORTE			NATU	RAL GAS	11	2 *	6.01.6			
Name of Authorized Transporter of Oil Amoco Pipeline Intere							copy of this form OK 74170		u)		
Name of Authorized Transporter of Casin Yates Petroleum Corpo			Gas X	Address (Give address to which approved a 105 So. 4th St., Artes			copy of this form	copy of this form is to be sent) La, NM 88210			
If well produces oil or liquids, give location of tanks.	Unit   P	<b>S∞.</b> 9	Twp.	Rge. 24e	ls gas actuall Yes	y connected?	When	? 3-15-91			
If this production is commingled with that		ner lease or			ling order num	ber:					
IV. COMPLETION DATA		10::11:		31/ 11	1	I w	1 D	L Dissa Davida Je	D!-	Disc Deale	
Designate Type of Completion		Oil Wel	i	X	New Well	Workover 	Deepen	Plug Back   S	ame Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.	F		
1-30-91	3-28-91				93401			9152			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
3749' GR Canyon					7534'			7454	Depth Casing Shoe		
Perforations 7534-7587 *				•			9340'				
7534-7567	-	TIBING	CASIN	IG AND	CEMENTI	NG RECOI	RD	-			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SA	SACKS CEMENT		
26"	20"				40'			Redi-Mix of ID			
14-3/4"	9-5/8"			1216'				100 sx	4-19-9		
8-3/4"	7''				9340'			2:	300 sx	compt	
		2-7/8"	ADIE		<u> </u>	7454					
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR A	ALLUW	ABLE of load o	il and mus	i he equal to oi	exceed top al	lowable for th	is depth or be for	r full 24 how	rs.)	
Date First New Oil Run To Tank	Date of To				Producing M	ethod (Flow, p	oump, gas lift,	eic.)	<del>-1</del>		
Length of Test	Tubing Pr	Tubing Pressure			Casing Pressure			Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF	Gas- MCF			
Actual Flod: During Feet	0.1 - 00.1	·•						<u> </u>			
GAS WELL					Int. C			10-11-20	adar est :		
Actual Prod. Test - MCF/D 2190	Length of Test 24 hrs			Bbis. Condensate/MMCF				Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 450				Casing Pressure (Shut-in) Pkr			Choke Size	Choke Size 7/16"		
VI. OPERATOR CERTIFIC			PLIAN	VCE.	-\r						
I hereby certify that the rules and reg Division have been complied with an	ulations of th	e Oil Cons	ervation			OIL CO	NSERV	ATION E			
is true and complete to the best of my	knowledge	and belief.			Dat	e Approv	ed	APR :	1 2 199	1	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Signature Juanita

Printed Name 4-2-91

Date

Goodlett

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

By\_

Title

ORIGINAL SIGNED BY

SUPERVISOR, DISTRICT IT

MIKE WILLIAMS

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

748-1471

Telephone No.

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.

- Production Supvr.

(505)