

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Yates Energy Corporation		Well API No. 30-015-26641
Address P. O. Box 2323, Roswell, New Mexico 88202-2323		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>		<input type="checkbox"/> Other (Please explain)
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

RECEIVED

JUN 28 1991

O. C. D.
ARTESIA, OFFICE

II. DESCRIPTION OF WELL AND LEASE

Lease Name Prickly Pear Federal	Well No. #2	Pool Name, Including Formation Loco Hills	Kind of Lease State, Federal or Fee	Lease No. NM-2538
Location Unit Letter <u>E</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>West</u> Line Section <u>12</u> Township <u>18 South</u> Range <u>31 East</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Navajo Refining Company	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas Conoco, Inc.	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 10 Desta Drive, Suite 627, Midland, TX 79705
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 12
	Twp. 18S	Rge. 31E
If this production is commingled with that from any other lease or pool, give commingling order number:	Is gas actually connected?	When?
	Yes	4/25/91

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 2/22/91	Date Compl. Ready to Prod. 4/26/91		Total Depth 5504'		P.B.T.D. 5350'			
Elevations (DF, RKB, RT, GR, etc.) 3757.7 GR Perforations 4194' - 4198'	Name of Producing Formation Loco Hills Sand		Top Oil Gas Pay 4194'		Tubing Depth 4155'			
					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE 12 1/4" 7 7/8"	CASING & TUBING SIZE 8 5/8" 4 1/2"	DEPTH SET 390' 5504'	SACKS CEMENT 300 sxs. Premium Plus 560 sxs. 50/50 Poz 950 sacks HLW

VI. 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 4/24/91	Date of Test 4/26/91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure 23	Choke Size 7-19-91
Actual Prod. During Test 174 bbls.	Oil - Bbls. 14	Water - Bbls. 160	Gas - MCF 11

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

VII. 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
JuLynn Jones
Printed Name
JuLynn Jones
Date
June 26, 1991
Agent
Title
(505) 623-4935
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 18 1991

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.