

OIL CONSERVATION DIVISION

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

MAY 25 1992

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator YATES PETROLEUM CORPORATION	Well API No. 30-015-27335
Address 105 South 4th St., Artesia, NM 88210	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> 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	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hooper AMP	Well No. 1	Pool Name, Including Formation North Dagger Draw Upper Penn	Kind of Lease State, Federal or <input checked="" type="radio"/> Fee	Lease No.
Location Unit Letter M : 820 Feet From The South Line and 660 Feet From The West Line Section 21 Township 19S Range 25E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Amoco Pipeline Intercorporate Trucking	Address (Give address to which approved copy of this form is to be sent) 502 N. West Avenue - Levelland, TX 79336					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 105 South Fourth St. - Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 21	Twp. 19S	Rge. 25E	Is gas actually connected? yes	When? 5-22-93

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 RH 4-6-93 Rotary 4-8-93	Date Compl. Ready to Prod. 5-24-93		Total Depth 8300'		P.B.T.D. 8244'			
Elevations (DF, RKB, RT, GR, etc.) 3503' GR	Name of Producing Formation Canyon		Top Oil/Gas Pay 7710'		Tubing Depth 7840'			
Perforations 7710-7817'					Depth Casing Shoe 8300'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	9-5/8" 36# J-55	1165'	1100 sx - circulate
8-3/4"	7" 26# & 23#	1425'	1425 sx - circulate
	2-7/8" tubing	7840'	

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 5-22-93	Date of Test 5-24-93	Producing Method (Flow, pump, gas lift, etc.) Pumping		Post ID-2
Length of Test 24 hours	Tubing Pressure 175	Casing Pressure 140	Choke Size open	6-11-93
Actual Prod. During Test 2561	Oil - Bbls. 666	Water - Bbls. 1895	Gas - MCF 1033	comp + B14

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 Rusty Klein
Printed Name Rusty Klein Title Production Clerk
Date May 24, 1993 Telephone No. (505) 748-1471

OIL CONSERVATION DIVISION

Date Approved MAY 28 1993

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.