

OIL CONSERVATION DIVISION

DRAWER DD

ARTESIA NM

DISTRICT OFFICE II

July thru December 1993

NO. 2173 N/2

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE November 18, 1993

PURPOSE ALLOWABLE ASSIGNMENT - NEW OIL

Effective November 1, 1993 an allowable for a non-marginal (700) well is hereby assigned to Yates Pet. Corp., Patriot AIZ Com #3-P-20-19-25 in the North Dagger Draw U/Penn Pool.

L - P

MP - P

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Yates Pet. Corp.

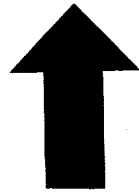
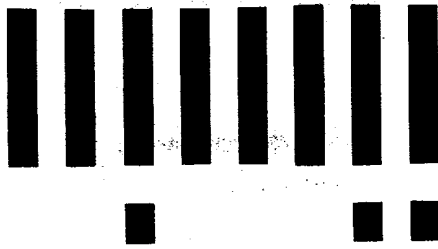
AMO
YPC

OIL CONSERVATION DIVISION

M. Magan

DISTRICT SUPERVISOR

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LTR



Job separation sheet

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

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

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. 30-015-27633
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 type="checkbox"/>
*AMENDED TO SHOW ADDITIONAL PERFORATIONS.		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Patriot AIZ Com	Well No. 3	Pool Name, Including Formation North Dagger Draw U/Penn	Kind of Lease /State/ Federal or Fee	Lease No.
Location Unit Letter <u>P</u> : <u>760</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>20</u> Township <u>19S</u> Range <u>25E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Amoco Pipeline Company <input checked="" type="checkbox"/>	or Condensate <input type="checkbox"/>	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 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 M	Sec. 21	Twp. 19S	Rge. 25E	Is gas actually connected? Yes	When? 10-22-93

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 9-18-93	Date Compl. Ready to Prod. 10-22-93		Total Depth 8330'		P.B.T.D. 8260'			
Elevations (DF, RKB, RT, GR, etc.) 3513' GR	Name of Producing Formation Canyon		Top Oil/Gas Pay 7710'		Tubing Depth 7815'			
Perforations 7710-7769', 7804-7808'*					Depth Casing Shoe 8330'			
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"		1160'		1300 sx - circulated			
8-3/4"	7"		8330'		1525 sx - circulated			
	2-7/8"		7815'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

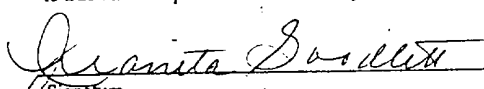
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank 10-22-93	Date of Test 11-2-93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 220	Casing Pressure 220	Choke Size 3/4"
Actual Prod. During Test 2299	Oil - Bbls. 874	Water - Bbls. 1425	Gas - MCF 1458

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 Supervisor
Printed Name
10-29-93
Date
505/748-1471
Telephone No.

OIL CONSERVATION DIVISION

NOV 18 1993

Date Approved

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.