

JUN 27 1983

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE OF RECEIPT	
DISTRIBUTION	
SANTA FE	
FILE	
U.S. B.	
LAND OFFICE	
TRANSPORTER	☒
OIL	☒
GAS	☒
OPERATOR	
REGISTRATION OFFICE	
REGULATOR	

Harvey E. Yates Company ✓

Address
P. O. Box 1933, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well	☐	Change in Transporter of:	
Recompletion	☒	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Yates A Federal	Well No. 1	Pool Name, including Formation East Burton Flats Delaware	Kind of Lease State, Federal or Fee Fed.	Lease No. NM-03677
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Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West	Line of Section 21	Township 20S	Range 29E	NMPM	Eddy	County
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DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Southern Union Plc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 980, Hobbs, New Mexico 88240
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Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
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Does well produce oil or liquids, give location of tanks.	Unit F	Sec. 21	Twp. 20	Rge. 29E	Is gas actually connected? NO-Used as Fuel	When
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If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res.	Diff. Res.
Designate Type of Completion - (X)		X					X		
Date Spudded 5/13/83	Date Compl. Ready to Prod. 6/10/83	Total Depth 12,000		P.B.T.D. 6300					
Elevations (DF, RAB, RT, GR, etc.) 3271'	Name of Producing Formation Delaware	Top Oil/Gas Pay 5456'		Tubing Depth 6300 5679					
Perforations 5456-5602' (8 holes)		Depth Casing Shoe 11,258							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	543	650
11	8 5/8	3124	2650
7 7/8	4 1/2	11258	1450
	2 3/8	5679	

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)

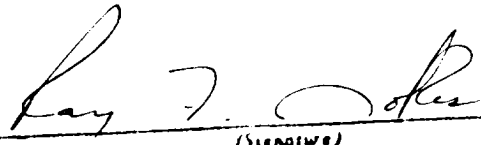
Date First New Oil Run To Tanks 6/15/83	Date of Test 6/22/83	Producing Method (Flow, pump, gas lift, etc.) Pump 2" X 1 1/2" X 20'	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble. 122	Water-Bble. 42	Gas-MCF TSTM

GAS WELL

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

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.



Reservoir Engineer

June 24, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____

BY _____

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ownership, size of number, or transporter, or other change of conditions.

Rate Form C-104 must be filed for each pool in multi-wells.