

# S. P. Y A T E S

OIL OPERATOR AND PRODUCER

YATES BUILDING - 207 SOUTH 4TH STREET

ARTESIA, NEW MEXICO - 88210

February 4, 1982

New Mexico Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501

Attention: Mr. Dick Stamets

Re: Non-Standard Proration Unit  
Southeast Chaves Queen Gas  
S. P. Yates  
Holder Federal No. 1  
660' FSL, 1980' FEL  
Section 4-13S-31E  
Chaves County, New Mexico

*NSP 1289  
Southeast Chaves Queen  
Gas Area  
Rule 4(b) R5353  
3-17-82*

*SE/H Sec 4*

Gentlemen:

The referenced well was spudded 11-29-64 and completed as a gas well 2-10-65 (recompleted 9-9-68) at 2615-2633' in the Queen formation. A copy of U.S.G.S. Form 9-330 "Well Completion or Recompletion Report" and Form C-102, with plat, are attached. We have now hooked up the well for sale of the gas to TUCO, Inc.

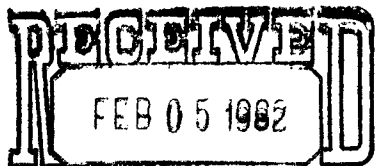
It is our understanding the special rules for the Southeast Chaves Queen Gas area were first proposed and adopted in November, 1972 (Order No. R-4435) which set the standard spacing unit of 320 acres. Since this well was completed prior to the date of the spacing unit order, we are requesting that we be allowed to produce under a non-standard proration unit of 160 acres, as shown on the attached plat. We are requesting an administrative approval under Rule 3 of Order No. R-4435.

We have sent notice of our intentions and a request for waiver to both offset operators and the other working interest owners in the S/2 of Section 4 of that same section. A list of offset operators and a copy of the letter with return receipt are attached.

Yours truly,

*Peyton Yates/lb*

Peyton Yates



PY:lab

enclosure  
OIL CONSERVATION DIVISION  
SANTA FE

P.S. We have also enclosed waivers that have already been returned. The remaining waivers will be forwarded as soon as possible.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other in-  
structions on  
reverse side)Form approved,  
Budget Bureau No. 42-R855.5.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

5. LEASE DESIGNATION AND SERIAL NO.

NM 015807

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Wildcat

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY  
OR AREA

Sec. 4-T13S-R31E

NMPM

12. COUNTY OR  
PARISH

Chaves

13. STATE

N. Mex.

1a. TYPE OF WELL:

OIL

☐

GAS

☒DRY ☐

Other

b. TYPE OF COMPLETION:

NEW

WELL ☒

WORK

OVER ☐

DEEP-

EN ☐

PLUG

BACK ☐

DIFF.

RESVR. ☐

Other

2. NAME OF OPERATOR

S. P. Yates

3. ADDRESS OF OPERATOR

207 So. 4th Street - Artesia, N. M. 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 660' FSL - 1980' FEL Sec. 4-T13S-R31E

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

11-29-64

16. DATE T.D. REACHED

1-29-64

17. DATE COMPL. (Ready to prod.)

2-10-65

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

4107KB, 4106DF, 4097GR

19. ELEV. CASING HEAD

-

20. TOTAL DEPTH, MD &amp; TVD

2940

21. PLUG, BACK T.D., MD &amp; TVD

-

22. IF MULTIPLE COMPL.,

HOW MANY\*

-

23. INTERVALS

DRILLED BY

ROTARY TOOLS

0-2940

CABLE TOOLS

-

24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)\*

2615-2633

25. WAS DIRECTIONAL  
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Laterlog &amp; Borehole Compensated Sonic-Gamma Ray

27. WAS WELL CORRED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	282	11"	100 sx	-
4 1/2"	9.5#	2913	7-7/8"	200 sx	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	2550	None

31. PERFORATION RECORD (Interval, size and number)

Perf 18' (2615-2633) 4 shots/ft

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2615-2633	Acidized with 500 gal acid

33.\*

DATE FIRST PRODUCTION

2-10-65

PRODUCTION DIVISION

Flowing SANTA FE

WELL STATUS (Producing or shut-in)

Shut-in

DATE OF TEST

9-9-68

HOURS TESTED

6 hrs.

CHOKE SIZE

28/64

PROD'N. FOR

TEST PERIOD

OIL--BBL.

0

GAS--MCF.

870

WATER--BBL.

Trace

GAS-OIL RATIO

-

FLOW. TUBING PRESS.

615#

CASING PRESSURE

-

CALCULATED

24-HOUR RATE

OIL--BBL.

-

GAS--MCF.

3480

WATER--BBL.

Trace

OIL GRAVITY-API (CORR.)

-

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Shut-in Gas Well- No market as yet

TEST WITNESSED BY

Cliff Loyd

35. LIST OF ATTACHMENTS

Well completion logs and Deviation Survey

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Paul M. White

TITLE

Engineer

DATE

9-10-68

\*(See Instructions and Spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

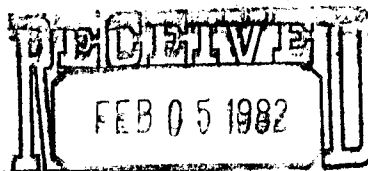
**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Queen Sand	2615	2633	Sand	Top of salt Base of salt Top of Yates Top of Queen	1140 1735 1868 2615		



OIL CONSERVATION DIVISION  
SANTA FE

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

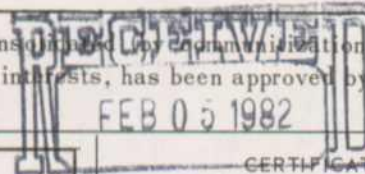
Operator <b>S. P. YATES</b>			Lease <b>Holder Federal</b>		Well No. <b>1</b>
Unit Letter <b>0</b>	Section <b>4</b>	Township <b>13 South</b>	Range <b>31 East</b>	County <b>Chaves</b>	
Actual Footage Location of Well: <b>660</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line					
Ground Level Elev.	Producing Formation <b>Queen</b>		Pool <b>Wildcat</b>		Dedicated Acreage: <b>160</b> Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes   ☐ No   If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**  
**OIL CONSERVATION DIVISION**  
**SANTA FE**  
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

*Juanita Goodlett*  
Name

**Juanita Goodlett**

Position  
**Engineering Secretary**

Company  
**S. P. Yates**

Date  
**January 21, 1982**

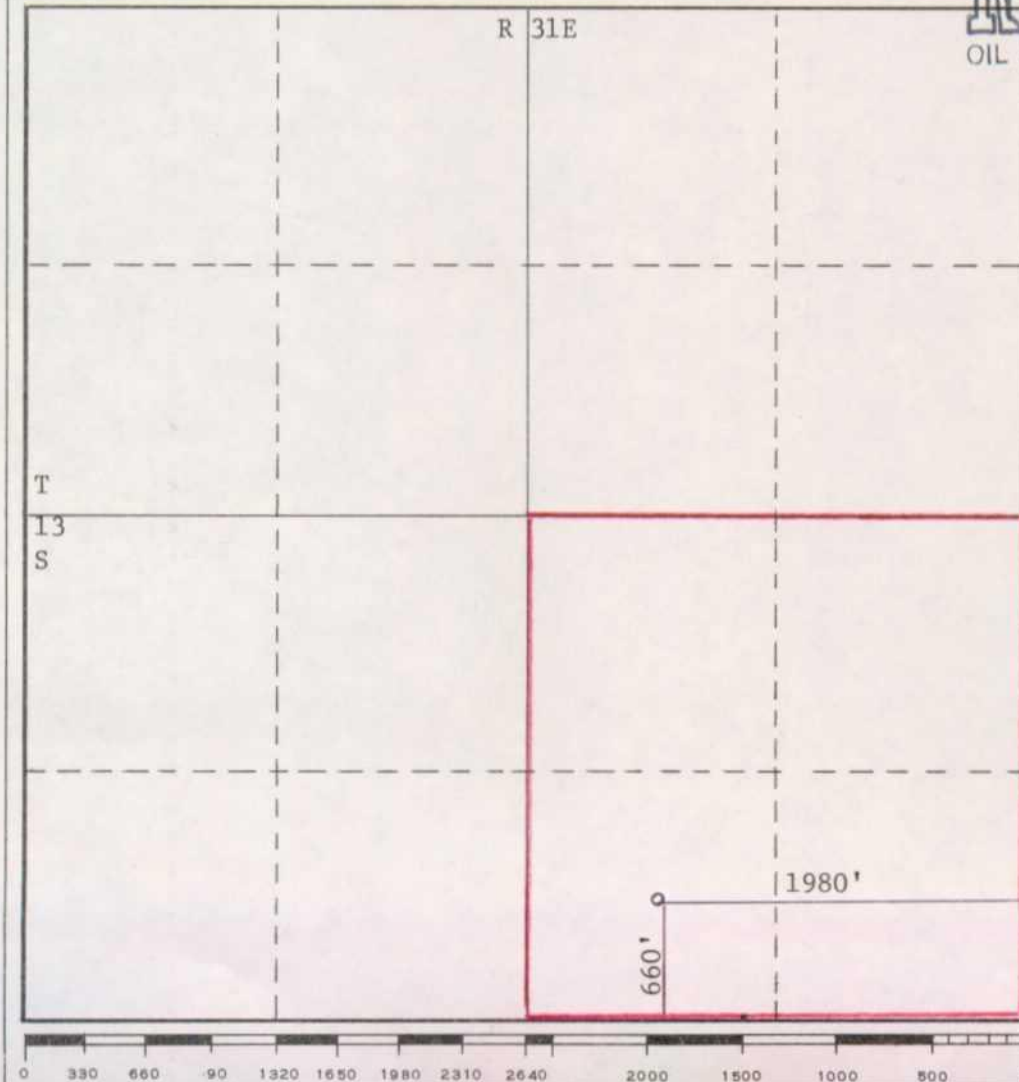
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

**REFER TO ORIGINAL PLAT**

Date Surveyed

Registered Professional Engineer and/or Land Surveyor

Certificate No.



**NEW MEXICO OIL CONSERVATION COMMISSION  
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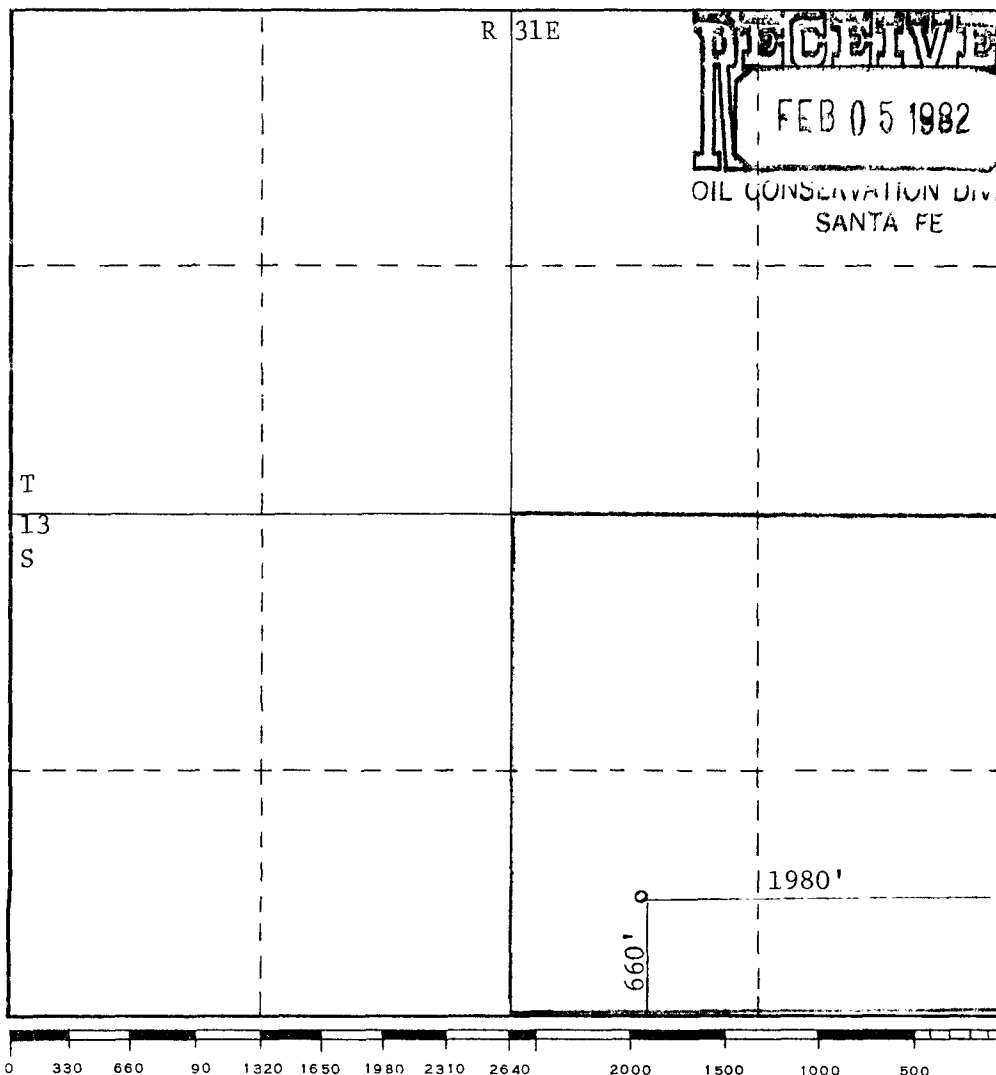
Operator <b>S. P. YATES</b>			Lease <b>Holder Federal</b>		Well No. <b>1</b>
Unit Letter <b>0</b>	Section <b>4</b>	Township <b>13 South</b>	Range <b>31 East</b>	County <b>Chaves</b>	
Actual Footage Location of Well: <b>660</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line					
Ground Level Elev.	Producing Formation <b>Queen</b>		Pool <b>Wildcat</b>		Dedicated Acreage: <b>160</b> Acres

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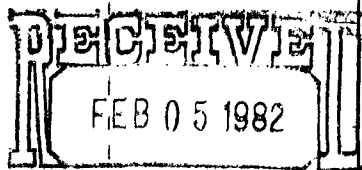
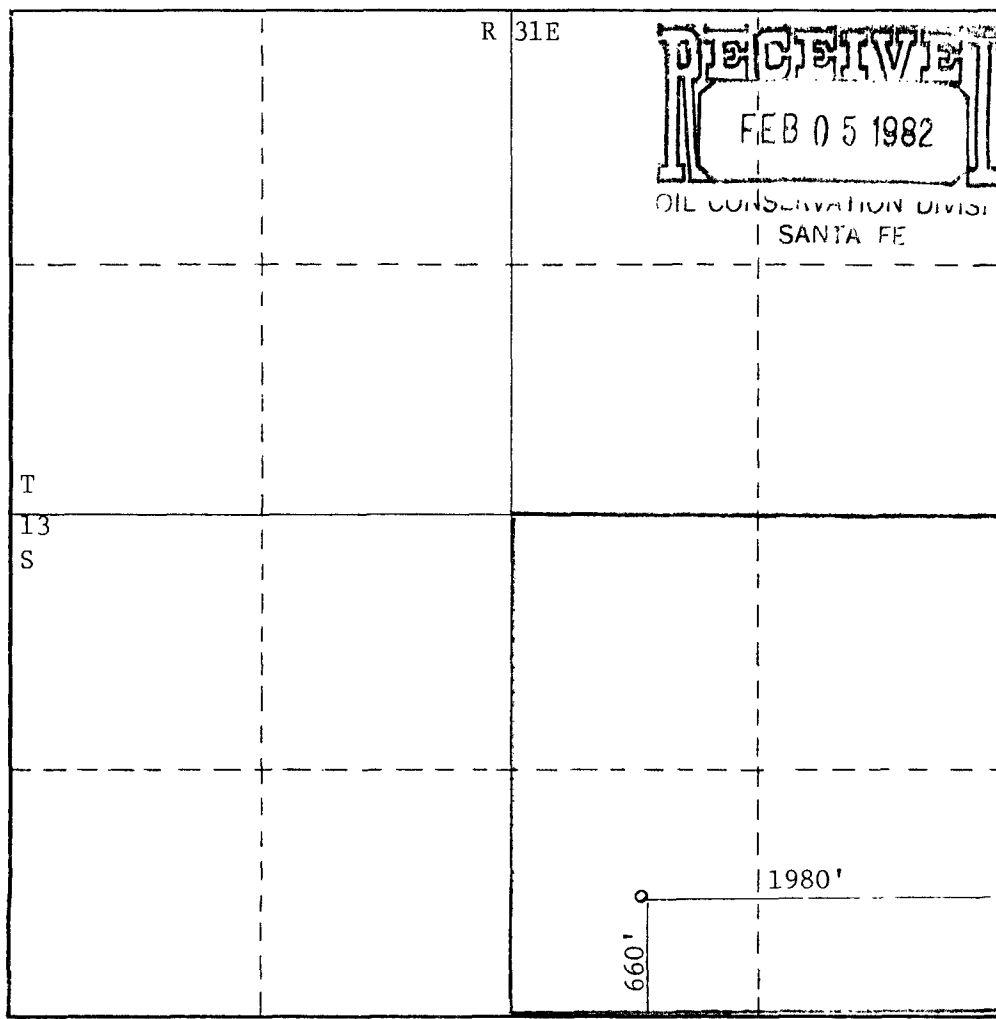
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Tract Letter <b>0</b>	Section <b>4</b>	Township <b>13 South</b>	Range <b>31 East</b>	County <b>Chaves</b>	
Actual Postage Location of Well: <b>660</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line					
Ground Level Elev.	Producing Formation <b>Queen</b>		Pool <b>Wildcat</b>		Dedicated Acreage: <b>160</b> Acres

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Name

**Juanita Goodlett**

Position  
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**S. P. Yates**

Date  
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Registered Professional Engineer  
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Certificate No.

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	<p><b>CERTIFICATION</b></p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Juanita Goodlett</i> Name <b>Juanita Goodlett</b></p> <p>Position <b>Engineering Secretary</b></p> <p>Company <b>S. P. Yates</b></p> <p>Date <b>January 21, 1982</b></p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.</p> <p><b>REFER TO ORIGINAL PLAT</b></p> <p>Date Surveyed _____</p> <p>Registered Professional Engineer and/or Land Surveyor _____</p> <p>Certificate No. _____</p>

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

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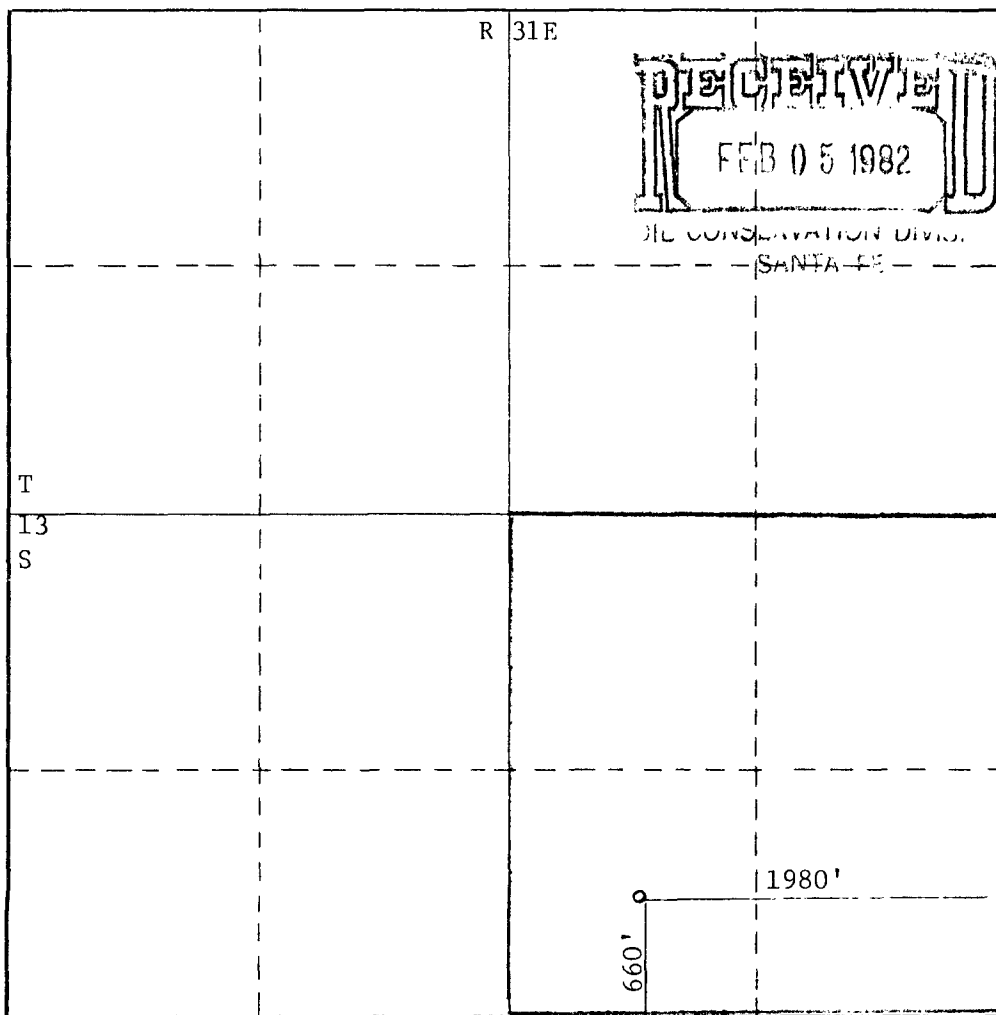
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CERTIFICATION

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Name

*Juanita Goodlett*  
**Juanita Goodlett**

Position

**Engineering Secretary**

Company

**S. P. Yates**

Date

**January 21, 1982**

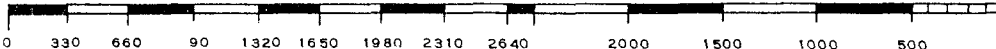
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REFER TO ORIGINAL PLAT

Date Surveyed

Registered Professional Engineer and/or Land Surveyor

Certificate No.





# S. P. Y A T E S

OIL OPERATOR AND PRODUCER

YATES BUILDING - 207 SOUTH 4TH STREET

ARTESIA, NEW MEXICO - 88210

January 14, 1982

TO: WORKING INTEREST OWNERS IN E/2 OF SECTION 4  
AND ALL OFFSET OPERATORS

Re: Non-Standard Proration Unit  
Southeast Chaves Queen Gas  
S. P. Yates  
Holder Federal No. 1  
Section 4-13S-31E  
Chaves County, New Mexico

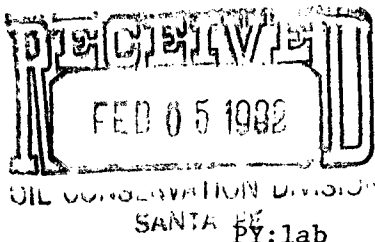
Gentlemen:

As an offset operator to the subject well, you are hereby notified of our intention to request approval of non-standard proration unit of 160 acres in order to produce the well. The request for approval is being handled under the format set out by Order No. R-4435 dated November 13, 1972, which sets special rules for the Southeast Chaves Queen Gas area in Chaves County, New Mexico. The rules were adopted in November of 1972. The subject well was completed in February of 1965 prior to the hearing concerning the special area rules, which set 320-acre spacing.

We respectfully request your consent to our application for the non-standard 160-acre proration unit. If you are in consent, please so indicate by signing the attached statement and returning it to myself at the above address. If you have any questions concerning this matter, please call me collect.

Yours truly,

*Peyton Yates/lb*  
Peyton Yates



enclosures

P.S.: Attached is a land ownership plat which locates the well.

OFFSET OPERATORS

Holder Federal No. 1

Gulf Oil Company  
P. O. Box 1150  
Midland, Texas 79701

Anadarko  
P. O. Box 2497  
Midland, Texas 79702

Aminoil  
P. O. Box 10525  
Midland, Texas 79702

Mr. B. J. Graham  
P. O. Box 7037  
Midland, Texas 79701

Mr. George Williams  
207 W. Avenue B  
Lovington, New Mexico 88260

PS Form 3811, Jan. 1979

1. The following service is requested (check one.)  
☒ Show to whom and date delivered.....  
☐ Show to whom, date and address of delivery.....  
☐ RESTRICTED DELIVERY  
Show to whom and date delivered.....  
☐ RESTRICTED DELIVERY.  
Show to whom, date, and address of delivery.\$\_\_\_\_\_  
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
*Box 150  
Midland, TX 79701*

3. ARTICLE DESCRIPTION:  
REGISTERED NO. CERTIFIED NO. INSURED NO.  
\_\_\_\_\_  
(Always obtain signature of addressee or agent)

I have received the article described above.  
SIGNATURE ☐ Addressee ☐ Authorized agent  
*[Signature]*

4. DATE OF DELIVERY  
*1-18-82*

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS  
*[Signature]*

☆GPO : 1979-300-459

PS Form 3811, Jan. 1979

1. The following service is requested (check one.)  
☒ Show to whom and date delivered.....  
☐ Show to whom, date and address of delivery.....  
☐ RESTRICTED DELIVERY  
Show to whom and date delivered.....  
☐ RESTRICTED DELIVERY.  
Show to whom, date, and address of delivery.\$\_\_\_\_\_  
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
*Anadarko  
Box 2497  
Midland, TX 79702*

3. ARTICLE DESCRIPTION:  
REGISTERED NO. CERTIFIED NO. INSURED NO.  
\_\_\_\_\_  
(Always obtain signature of addressee or agent)

I have received the article described above.  
SIGNATURE ☐ Addressee ☐ Authorized agent  
*E. Doolley*

4. DATE OF DELIVERY  
*1-18-82*

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS  
*[Signature]*

☆GPO : 1979-300-459

PS Form 3811, Jan. 1979

1. The following service is requested (check one.)  
☒ Show to whom and date delivered.....  
☐ Show to whom, date and address of delivery.....  
☐ RESTRICTED DELIVERY  
Show to whom and date delivered.....  
☐ RESTRICTED DELIVERY.  
Show to whom, date, and address of delivery.\$\_\_\_\_\_  
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
*Box 10525  
Midland, TX 79702*

3. ARTICLE DESCRIPTION:  
REGISTERED NO. CERTIFIED NO. INSURED NO.  
\_\_\_\_\_  
(Always obtain signature of addressee or agent)

I have received the article described above.  
SIGNATURE ☐ Addressee ☐ Authorized agent  
*[Signature]*

4. DATE OF DELIVERY  
*1-18-82*

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS  
*[Signature]*

☆GPO : 1979-300-459

PS Form 3811, Jan. 1979

1. The following service is requested (check one.)  
☒ Show to whom and date delivered.....  
☐ Show to whom, date and address of delivery.....  
☐ RESTRICTED DELIVERY  
Show to whom and date delivered.....  
☐ RESTRICTED DELIVERY.  
Show to whom, date, and address of delivery.\$\_\_\_\_\_  
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
*Mr. B. G. Graham  
Box 7037  
Midland TX 79701*

3. ARTICLE DESCRIPTION:  
REGISTERED NO. CERTIFIED NO. INSURED NO.  
\_\_\_\_\_  
(Always obtain signature of addressee or agent)

I have received the article described above.  
SIGNATURE ☐ Addressee ☐ Authorized agent  
*[Signature]*

4. DATE OF DELIVERY  
*1-18-82*

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS  
*[Signature]*

☆GPO : 1979-300-459

# Federal AA and Heider Federal

PS Form 3811, Jan. 1979

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

<p>SENDER: Complete items 1, 2, and 3. Add your address in the "RETURN TO" space on reverse.</p>								
<p>1. The following service is requested (check one.)</p> <p><input checked="" type="checkbox"/> Show to whom and date delivered.....¢</p> <p><input type="checkbox"/> Show to whom, date and address of delivery.....¢</p> <p><input type="checkbox"/> RESTRICTED DELIVERY</p> <p>    Show to whom and date delivered.....¢</p> <p><input type="checkbox"/> RESTRICTED DELIVERY.</p> <p>    Show to whom, date, and address of delivery.\$____</p> <p>(CONSULT POSTMASTER FOR FEES)</p>								
<p>2. ARTICLE ADDRESSED TO:</p> <p><i>George Williams</i> <i>207 W. Avenue B</i> <i>Longmont, NM 88260</i></p>								
<p>3. ARTICLE DESCRIPTION:</p> <table border="1"> <tr> <td>REGISTERED NO.</td> <td>CERTIFIED NO.</td> <td>INSURED NO.</td> </tr> <tr> <td></td> <td><i>3432931</i></td> <td></td> </tr> </table> <p>(Always obtain signature of addressee or agent)</p> <p>I have received the article described above.</p> <p>SIGNATURE <input type="checkbox"/> Addressee <input type="checkbox"/> Authorized agent</p> <p><i>George Williams</i></p>			REGISTERED NO.	CERTIFIED NO.	INSURED NO.		<i>3432931</i>	
REGISTERED NO.	CERTIFIED NO.	INSURED NO.						
	<i>3432931</i>							
<p>4. DATE OF DELIVERY</p> <p><i>2-1-82</i></p>		<p>POSTMARK</p>						
<p>5. ADDRESS (Complete only if requested)</p>								
<p>6. UNABLE TO DELIVER BECAUSE:</p>		<p>CLERK'S INITIALS</p>						

WAIVER OF NOTICE

The undersigned hereby gives written consent to the proposal of S. P. Yates to form a non-standard 160-acre proration unit for the following well in order to produce the well from the Queen Gas formation under New Mexico Oil Conservation Division Order No. R-4435, Southeast Chaves Queen Gas area special rules.

S. P. Yates  
Holder Federal No. 1  
Section 4-13S-31E  
Chaves County, New Mexico

Approved by C. F. Kalteyer for Gulf Oil Corporation  
Chief Proration Engineer  
this 26 day of January, 1982.

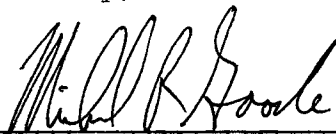
C. F. Kalteyer

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S. P. Yates  
Holder Federal No. 1  
Section 4-13S-31E  
Chaves County, New Mexico

Approved by Michael R. Goode, Division Landman for Anadarko  
Production Company this 19th day of January, 1982.

  
\_\_\_\_\_

WAIVER OF NOTICE

The undersigned hereby gives written consent to the proposal of S. P. Yates to form a non-standard 160-acre proration unit for the following well in order to produce the well from the Queen Gas formation under New Mexico Oil Conservation Division Order No. R-4435, Southeast Chaves Queen Gas area special rules.

S. P. Yates  
Holder Federal No. 1  
Section 4-13S-31E  
Chaves County, New Mexico

Approved by Beil J. Graham for Beil J. Graham  
this 18 day of January, 1982.

Beil J. Graham

WAIVER OF NOTICE

The undersigned hereby gives written consent to the proposal of S. P. Yates to form a non-standard 160-acre proration unit for the following well in order to produce the well from the Queen Gas formation under New Mexico Oil Conservation Division Order No. R-4435, Southeast Chaves Queen Gas area special rules.

S. P. Yates  
Holder Federal No. 1  
Section 4-13S-31E  
Chaves County, New Mexico

Approved by George Williams for \_\_\_\_\_  
this 1st day of <sup>February</sup>~~January~~, 1982.

George H. Williams