

| | |
|-------------------|--|
| TYPE OF WELL | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G. | |
| LAND OFFICE | |
| TRANSPORTER | |
| OPERATOR | |
| PRODUCTION OFFICE | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APR 7 1982

O. C. D.
ARTESIA, OFFICE

Yates Petroleum Corporation /

Address
207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

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

Other (Please explain)

(Change of ownership give name
and address of previous owner)

DESCRIPTION OF WELL AND LEASE

| | | | | |
|---------------------------------|---------------|---|--|-----------------------|
| Lease Name Thomas LN Federal | Well No. 3 | Pool Name, Including Formation Pecos Slope Abo Gas | Kind of Lease State, Federal or Free Federal | Lease No. NM 10263 |
|---------------------------------|---------------|---|--|-----------------------|

Location

Unit Letter F ; 1980 Feet From The North Line and 1980 Feet From The West

Line of Section 14 Township 6S Range 25E , NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|---|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co. | Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, NM 88210 |
|---|--|

| | |
|---|---|
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Co. | Address (Give address to which approved copy of this form is to be sent) Box 2521, Houston, TX 77001 |
|---|---|

| | | | | | | |
|---|-----------|------------|------------|-------------|-----------------------------------|---------------------------------|
| If well produces oil or liquids, give location of tanks. | Unit F | Sec. 14 | Twp. 6s | Rge. 25e | Is gas actually connected? Yes | When approx 6 wks 3-16-83 |
|---|-----------|------------|------------|-------------|-----------------------------------|---------------------------------|

(If this production is commingled with that from any other lease or pool, give commingling order number)

COMPLETION DATA

| | | | | | | | | |
|--|--------------------------------------|--------------------------|----------------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Restv. | Diff. Restv. |
| | | X | X | | | | | |
| Date Spudded 3-20-82 | Date Compl. Ready to Prod. 4-4-82 | Total Depth 4282' | P.B.T.D. 4221' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3860.6' GR | Name of Producing Formation Abo | Top Oil/Gas Pay 3723' | Tubing Depth 3720' | | | | | |
| Perforations 3723-3890' | | | Depth Casing Shoe 4282' | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
| 24" | 20" | 40' | |
| 17-1/2" | 13-3/8" | 878' | 2800 |
| 11" | 8-5/8" | 1766' | 750 |
| 7-7/8" | 4-1/2" | 4282' | 450 |
| | 2-3/8" | 3720' | |

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)

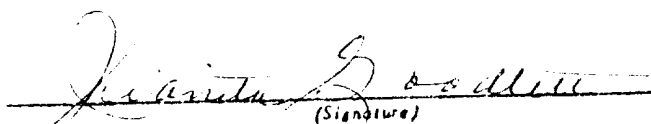
| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |

GAS WELL

| | | | |
|---|----------------------------------|--------------------------------|----------------------------|
| Actual Prod. Test-MCF/D 348 | Length of Test 2 hrs | Bbls. Condensate/MMCF - | Gravity of Condensate - |
| Testing Method (pilot, back pr.) Back Pressure | Tubing Pressure (Shut-in) 275 | Casing Pressure (Shut-in) - | Choke Size 3/4" |

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)

Engineering Secretary
(Title)

4-5-82

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 21 1983, 19

BY Original Signed By
Leslie A. Clements
TITLE Supervisor District II

This form is to be filed in compliance with RULE 1103.

If this is a request for allowable for a newly drilled or deepened 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 allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiple completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

RECEIVED

P. O. DRAWER "DD"

MAR 21 1983

ARTESIA, NEW MEXICO 88210

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION ✓

DATE March 17, 1983

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the Yates Petroleum Corp. ✓
Operator

Thomas "LN" Federal
Lease

Well #3 - Unit Letter "F"
Well Unit

14-6S-25E, Chaves County
S.T.R.

Pecos Slope (Abo)
Pool

Transwestern
Name of purchaser

was made on March 16, 1983

Transwestern Pipeline Company
Company

 H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe