

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

APR 8 1982

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

DATE RECEIVED	
DISTRIBUTION	
DATE	
BY	
AND OFFICER	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
OPERATION OFFICE	
REGULATOR	

Yates Petroleum Corporation /

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

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
		Casinghead Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Williamson LC Federal	4	Und. Pecos Slope Abo	State, Federal or Fee Federal	NM9539
Location				
Unit Letter	M	860 Feet From The	South	Line and
				660 Feet From The
				West
Line of Section	9	T. Township	8S	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"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.				Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Transwestern Pipeline Co.				Box 2521, Houston, TX 77001
Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Rge.
	M	9	8s	25e
Is gas actually connected?	When		approx 6-8 wks	
Yes			5-17-82	

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 Hstvy.	Diff. Hstvy.	
		X	X						
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
2-27-82	3-27-82	4100'		3947'					
Revisions (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
3649.5' GR	Abo	3613'		3625'					
Revisions	3613-3781'		3625'		Depth Casing Shoe				
					4076'				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20"	40'	
14-3/4"	10-3/4"	999'	800
12-1/4"	8-5/8"	1500'	250
7-7/8"	4-1/2"	4076'	400
	2-7/8"	3625'	

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top of hole 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

TEST WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
132	12 hrs	-	-
Setting Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	5	Packer	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.

Francis D. Doolittle
(Signature)
Engineering Secretary

(Title)

4-7-82

(Date)

OIL CONSERVATION DIVISION

MAY 25 1983

APPROVED _____, 19

BY *Mike Williams*

OIL AND GAS INSPECTOR

TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the device 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 well name or number, or transporter, or other such change of conditions.
Separate Form C-104 must be filed for each pool in multi-completed wells.

YATES PETROLEUM CORPORATION - OPERATOR

DEVIATION SURVEY

Williamson "LC" Federal #4 - NM-9539
Unit M, 860' FSL & 660' FWL
Section 9-T8S-R25E
Chaves County, New Mexico

The following is a Deviation Survey of the above captioned well provided by Bennett-Cathey Wire Line Service, P. O. Box 787, Artesia, NM 88210. Test date for this survey 8-11-82. The information is true and accurate to the best of my knowledge.

<u>Depth</u>	<u>Deviation</u>
500'	1/2°
1000'	1/4°
1500'	3/4°
2000'	1/4°
2500'	1°
3000'	1°
3500'	2°

By: Juanita Goodlett
Juanita Goodlett, Engineering Secretary

Subscribed and sworn to before me this 31st day of August, A.D., 1982.

C. August Bennett
Notary Public

My Commission Expires:
January 31, 1985

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

MAY 23 1983

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE May 19, 1983

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

Williamson "LC" Fed. Lease

#4-M Well Unit

9-8S-25E, Chaves Co. S.T.R.

~~Und.~~ Pecos Slope (Abo) Pool

TW

was made on 5-17-83

Name of Purchaser

Transwestern Pipeline Company
Company

A. K. Berdy A. K. Berdy
Representative

Jr. Analyst Contract Administration
Title

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