

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
WELL	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PADDITION OFFICE	<input checked="" type="checkbox"/>
Operator	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation

Address

207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter ☒
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Other ☐

Other (Please explain)

RECEIVED

SEP 13 1982

If change of ownership give name
and address of previous owner

O. C. D.

ARTESIA, OFFICE

DESCRIPTION OF WELL AND LEASE

Lease Name Sacra SA	Well No. 4	Pool Name, Including Formation X Pecos Slope Abo	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>P</u> ; <u>330</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>35</u> Township <u>6S</u> Range <u>25E</u> , NMPM, <u>Chaves</u> 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 <u>P</u> Sec. <u>35</u> Twp. <u>6S</u> Rge. <u>25E</u>	Is gas actually connected? <u>Yes</u> When <u>approx 6-8-82</u> <u>5-3-83</u>

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 6-10-82	Date Compl. Ready to Prod. 9-10-82	Total Depth 4100'	P.B.T.D. 4032'					
Elevations (DF, RKB, RT, GR, etc.) 3661' GR	Name of Producing Formation Abo	Top Oil/Gas Pay 3622'	Tubing Depth 3617'					
Perforations 3622-3764'			Depth Casing Shoe 4095'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	20"	80'	
14-3/4"	10-3/4"	800'	650
7-7/8"	4-1/2"	4095'	350
	2-3/8"	3617'	

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)

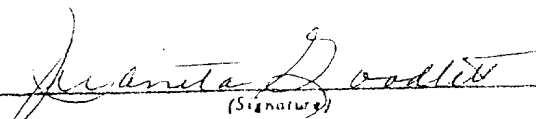
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 522	Length of Test 3 hrs	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (prior, back pr.) Back Pressure	Tubing Pressure (Shut-in)	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.



Engineering Secretary

(Title)

9-13-82

(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 09 1983, 19
Original Signed By
BY Leslie A. Clements
Supervisor District II
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 deviation 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 Forms C-104 must be filed for each pool in multiple completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

MAY 06 1983

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE May 4, 1983

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

Sacra "SA"

Lease

#4-P

Well Unit

35-6S-25E, Chaves County

S.T.R.

Pecos Slope (Abo)

Pool

Transwestern

Name of Purchaser

was made on

May 3, 1983

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

APPLICATION FOR WELLHEAD
PRICE CEILING CATEGORY DETERMINATION

FOR DIVISION USE ONLY:

DATE COMPLETE APPLICATION FILED _____

DATE DETERMINATION MADE _____

WAS APPLICATION CONTESTED? YES _____ NO _____

NAME(S) OF INTERVENOR(S), IF ANY: _____

RECEIVED

OCT 21 1982

O. C. D.
ARTESIA, OFFICE

5A. Indicate Type of Lease
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name
Sacra SA
9. Well No.
#4
10. Field and Pool, or Wildcat
Pecos Slope Abo
12. County
Chaves

2. Name of Operator	YATES PETROLEUM CORPORATION
3. Address of Operator	207 S. 4th St., Artesia, NM 88210
4. Location of Well	UNIT LETTER <u>P</u> LOCATED <u>330</u> FEET FROM THE <u>South</u> LINE
AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>35</u> TWP. <u>6S</u> RGE. <u>25E</u> NMPM	
11. Name and Address of Purchaser(s)	Transwestern Pipeline Co., POB 2521, Houston, Tx. 77001

WELL CATEGORY INFORMATION

Check appropriate box for category sought and information submitted. 102 (C) (1) (B) and

-1. Category(ies) Sought (By NGPA Section No.) 107(c) (5) Abo TF Docket RM79-76 (NM-3)

2. All Applications must contain:

Order 157, Issued 6-10-81

- ☒ a. C-101 APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK
- ☒ b. C-105 WELL COMPLETION OR RECOMPLETION REPORT
- ☐ c. DIRECTIONAL DRILLING SURVEY, IF REQUIRED UNDER RULE 111
- ☒ d. AFFIDAVITS OF MAILING OR DELIVERY

3. In addition to the above, all applications must contain the items required by the applicable rule of the Division's "Special Rules for Applications For Wellhead Price Ceiling Category Determinations" as follows:

A. NEW NATURAL GAS UNDER SEC. 102(c)(1)(B) (using 2.5 Mile or 1000 Feet Deeper Test)

☒ All items required by Rule 14(1) and/or Rule 14(2)

B. NEW NATURAL GAS UNDER SEC. 102(c)(1)(C) (new onshore reservoir)

☐ All items required by Rule 15

C. NEW ONSHORE PRODUCTION WELL

☐ All items required by Rule 16A or Rule 16B

D. DEEP, HIGH-COST NATURAL GAS, TIGHT FORMATION NATURAL GAS, AND PRODUCTION ENHANCEMENT NATURAL GAS

☒ All items required by Rule 17(1), Rule 17(2) or Rule 17(3), or Rule 17(4)

E. STRIPPER WELL NATURAL GAS

☐ All items required by Rule 18

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED
HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE AND BELIEF.

B.W. HARPER

NAME OF APPLICANT (Type or Print)

SIGNATURE OF APPLICANT

Secretary-Treasurer

Title

Date 10-8-82

FOR DIVISION USE ONLY

☐ Approved

☐ Disapproved

The information contained herein includes all
of the information required to be filed by the
applicant under Subpart B of Part 274 of the
FERC regulations.

EXAMINER