

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

APR 27 1982

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASO. C. D.
ARTESIA, OFFICE

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	
Operator	

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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <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 Langley RJ Federal	Well No. 3	Pool Name, Including Formation Pecos Slope Abo	Kind of Lease NM-19416 State, Federal or Fee Federal	Lease
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Location	Unit Letter P	: 660 Feet From The South Line and 660 Feet From The East	Line of Section 9	Township 6S	Range 25E	NMPM, Chaves	County
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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					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 9	Twp. 6s	Rge. 25e	Is gas actually connected? Yes	When approx 6-8 wks 11-9-82

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 <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res't'v. <input type="checkbox"/>	Diff. <input type="checkbox"/>
Date Spudded 4-3-82	Date Compl. Ready to Prod. 4-24-82	Total Depth 4175'	P.B.T.D. 4136'					
Elevations (DF, RKB, RT, GR, etc.) 3987.6' GR	Name of Producing Formation Abo	Top Oil/Gas Pay 3742'	Tubing Depth 3699'					
Perforations 3742-3907'	Depth Casing Shoe 4150'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20"	40'	
12-1/4"	8-5/8"	925'	700
7-7/8"	4-1/2"	4150'	350
	2-3/8"	3699'	

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)

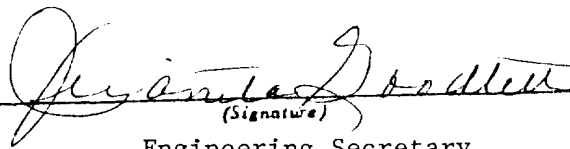
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 165	Length of Test 4 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.) Back Pressure	Tubing Pressure (Shut-in) 145	Casing Pressure (Shut-in) Packer	Choke Size 1/2"

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)
4-26-82
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 16 1982, 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 device tools 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 owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filled for each pool in multi-completed wells.

NEW MEXICO OIL CONSERVATION DIVISION

RECEIVED

P. O. DRAWER "DD"

NOV 1

ARTESIA, NEW MEXICO 88210

O. C.
ARTESIA

NOTICE OF GAS CONNECTION

DATE November 10, 1982

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

Langley "RJ" Federal
Lease

Well #3 - Unit Letter "P"
Well Unit

9-6S-25E, Chaves County
S.T.R.

Pecos Slope (Abo)
Pool

Transwestern
Name of purchaser

was made on November 9, 1982

Transwestern Pipeline Company
Company

 H. N. Aicklen
Representative

Supervisor Gas Purchase Contract Administration
Title

cc: Operator
Oil Conservation Division - Santa Fe