

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501

RECEIVED

AUG 26 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

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TRANSPORTER	☒
OPERATION	☒
PRODUCTION OFFICE	☒
Operator	

YATES PETROLEUM CORPORATION

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

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	
Recompletion ☐	
Change in Ownership ☐	
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Witz VN State	Well No. 3	Pool Name, including Formation Foor Ranch Wolfcamp Gas	Kind of Lease State, Federal or Fee	State	Lease No. LG-939
Location Unit Letter <u>I</u> ; 1980 Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>26</u> Township <u>9S</u> Range <u>26E</u> , NMPM, <u>Chaves County</u>					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Yates Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 105 South 4th St., Artesia, NM 88210
If well produces oil or liquids, give location of tanks.	Unit <u>I</u> Sec. <u>26</u> Twp. <u>9S</u> Rge. <u>26E</u> Is gas actually connected? <u>YES</u> When <u>8-24-88</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 Res't's ☐ Diff. Res't's ☐		
Date Spudded 6-11-88	Date Compl. Ready to Prod. 8-20-88	Total Depth 6410'	P.B.T.D. 6040'
Elevations (D.F., R.K.H., R.T., G.H., etc.) 3806.5' GR	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 5271'	Tubing Depth 5893'
Perforations 5271-5276'			Depth Casing Shoe 6410'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	12-1/4"	1083'	525 SX
7-7/8"	5-1/2"	6410'	425 SX
	2-7/8"	5893'	

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)

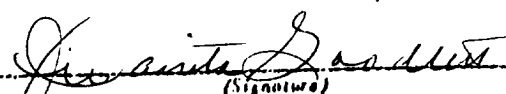
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.) <u>Test ID-2</u> <u>9-16-88</u> <u>camp & B14</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 2085	Length of Test 6 hrs	Bbls. Condensate/MCF -	Gravity of Condensate -
Testing Method (pacer, back pr.) Back Pressure	Tubing Pressure (shut-in) 320 psi	Casing Pressure (shut-in) PKR	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)
Production Supervisor

8-25-88

OIL CONSERVATION DIVISION

SEP 12 1988

APPROVED _____, 19____
BY _____ Original Signed By _____
Mike Williams
TITLE _____

This form is to be filed in compliance with RULE 100.
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 conditions.