

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED

APR 16 '90

at Bottom of Page

REQUEST FOR ALLOWABLE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

C. D.
ARTESIA, OFFICE

I.

| | |
|---|------------------------------|
| Operator Yates Exploration Co., Inc. ✓ | Well API No. 30-005-62771 |
| Address P O Box 0 Albuquerque, NM 87103 | |
| Reason(s) for Filing (Check proper box) 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 Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| If change of operator give name and address of previous operator | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|----------------------|
| Lease Name EMMONS STATE | Well No. 1 | Pool Name, Including Formation Wolfridge San Andres | Kind of Lease State, Leasehold | Lease No. LE-7996 |
| Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>18</u> Township <u>9S</u> Range <u>28E</u> , NMPM, Chaves County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|---|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transportation Co. | Address (Give address to which approved copy of this form is to be sent) P O Box 1188 Houston, TX 77251-1188 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| If well produces oil or liquids, give location of tanks. Unit <u>D</u> Sec. <u>18</u> Twp. <u>9S</u> Rge. <u>28E</u> | Is gas actually connected? <u>NO</u> When ? |

If this production is commingled with that from any other lease or pool, give commingling order number: NONE

IV. COMPLETION DATA

| | | | | | | | | |
|--|--|----------------------------|--|----------|--------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded Feb 28, 1990 | Date Compl. Ready to Prod. April 7, 1990 | Total Depth 2354 | P.B.T.D. N/A | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3880 GL | Name of Producing Formation Slaughter of San Andres | Top Oil/Gas Pay 2221 Ft | Tubing Depth 2150 | | | | | |
| Perforations 1 sh 2221; 1 sh 2226; 16 sh 2232-2247; 4 sh 2251-2254; 1 sh 2257 | | | Depth Casing Shoe 2344 | | | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 12-1/2" | 8-5/8" | 382' | 220 sks <u>Set ID-2</u> | | | | | |
| 7-7/8" | 4-1/2" | 2344' | 135 sks <u>4-20-90</u> | | | | | |
| 4" | 2-3/8" | 2150' | N/A <u>comp + B11</u> | | | | | |

V. 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 Tank April 7, 1990 | Date of Test April 8, 1990 | Producing Method (Flow, pump, gas lift, etc.) Flow | |
| Length of Test 9 hr | Tubing Pressure 457 psi shutin | Casing Pressure 0 | Choke Size 1.86" |
| Actual Prod. During Test 45 Bbls | Oil - Bbls. 45 Bbl in 9 hrs or 120 in 24 hours | Water - Bbls. 0 | Gas - MCF 20 MCF approx/day |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. OPERATOR 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
Harvey E. Yates, Jr. President

Printed Name Title

April 12, 1990 242-2050

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 17 1990

By ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.