

OIL CONSERVATION DIVISION

P. O. BOX 2000

RECEIVED BY
SANTA FE, NEW MEXICO 87501

OCT -2 1986

REQUEST FOR ALLOWABLE
AND

O. C. D.

ARTESIA, OFFICE TO TRANSPORT OIL AND NATURAL GAS

Yates Petroleum Corporation

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

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 12-8-86UNLESS AN EXCEPTION TO:
RULE 306 IS OBTAINEDChange 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.
Amoco State HE	1	Artesia-Qn-Grbg-SA	State, Federal or Fee State	L-5033

Location

Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The WestLine of Section 11 Township 19S Range 27E , NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Navajo Refining Co.

PO Box 159, Artesia, NM 88210

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)

Is well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	11	19s	27e	No	

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 Reat.	Diff. Reat.
	X					X		X
Date Spudded RE-COMPLETION	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8-27-86	9-29-86	10570'	2890'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3841.2' GR	Grayburg	1652'	1830'					
Perforations			Depth Casing Shoe					
1652-1879'			8848'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	514' (in place)	300
12-1/4"	9-5/8"	3300' (in place)	2380
8-3/4"	7"	8848' (in place)	2200
	2-7/8"	1830'	

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.)	
9-18-86	9-29-86	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	12	12	Open
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
13	5	8	3.4

GAS WELL

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

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.

OIL CONSERVATION DIVISION

OCT 8 1986

APPROVED _____, 19

Original Signed By

BY Les A. ClementsTITLE Supervisor District II

This form is to be filed in compliance with RULE 111.

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 Form C-104 must be filed for each pool in multiple

Production Supervisor

10-2-86

(Date)