

OIL CONSERVATION DIVISION

P. O. BOX 2080
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF EXPLORATION PERMITS	
NO. OF EXPLORATION PERMITS	
SANCTUARY	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
TRANSPORTER	GAS
OPERATION	
FORMATION OFFICE	
Operator	

Yates Petroleum Corporation

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

Reason(s) for filing (check proper box)

New Well ☐Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

Change of ownership effective 11-26-85.
Well originally drilled & completed
by Cola Petroleum, Inc.If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cola ADO State Com	Well No. 1	Pool Name, including Formation Bar-U-Penn	Kind of Lease State, Federal or Fee State	Lease No. LG 1348
Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>8S</u> Range <u>33E</u> , NMPM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Casinghead Gas ☒ Tesoro Crude Oil Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 2297, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ TSTM	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 F	Sec. 31	Twp. 8s	Rge. 33e	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Restv.	Diff. Res.
X								
Date Spudded 10-3-79	Date Compl. Ready to Prod. 12-21-79		Total Depth 9220'		P.B.T.D. 9171			
Elevations (D.F., R.R.H., R.T., G.R., etc.) 4390' GR	Name of Producing Formation Bough C		Top Oil/Gas Pay 9069'		Tubing Depth 9220			
Perforations Bough C - 9069-9163'					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	12-3/4"	412'	400
11"	8-5/8"	3680'	580
7-7/8"	4-1/2"	9220'	800
	2-3/8"	9177'	

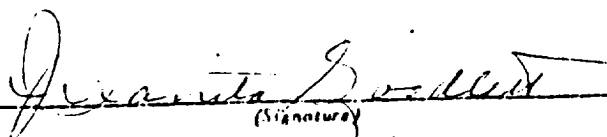
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top all
oil well able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-27-85 *	Date of Test 12-2-85	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 105	Oil-1bls. 5	Water-1bls. 100	Gas-MCF TSTM

*Date first oil after Yates became operator.

Actual Prod. Test-MCF/D	Length of Test	1bls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

VI. 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.

Production Supervisor

12-30-85

(Date)

(Date)

OIL CONSERVATION DIVISION

APPROVED **JAN 7 - 1986**, 19BY **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

TITLE

This form is to be filed in compliance with RULE 100.
If this is a request for allowable for a newly drilled or deeper
well, this form must be accompanied by a tabulation of the deviat.
tests 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 own
well name or number, or transporter, or other such change of condition.

This form must be filed for each well in month