

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

Yates Petroleum Corporation

Address

207 South 4th St., Artesia, NM 88210

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

**CASINGHEAD GAS MUST NOT BE
FLARED AFTER
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED from the**

Management Service

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Union SI Federal	2	Und. Tomahawk SA <i>Tomahawk</i>	NM-0558018 State, Federal or Fee Federal	
Location				
Unit Letter	C	660 Feet From The North	Line and 1980	Feet From The East <i>West</i>
Line of Section	1	T. 8S	Range 31E	NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input 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 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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	1	8s	31e	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 Resv.	Diff. Resv.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-1-82	6-2-82		4327'		4279'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
4377.6' GR	San Andres		3957'		4236'			
Perforations	3957-4155'				Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	1700'	600
7-7/8"	4-1/2"	4327'	250
	2-3/8"	4236'	

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.)	
5-23-82	6-2-82	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	20#	20#	Open
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
93	44	49	11

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

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.

Juanita L. Bonilla
(Signature)

Engineering Secretary

(Title)

6-2-82

(Date)

OIL CONSERVATION DIVISION

APPROVED

JUN 7 1982

, 19

BY

ORIGINAL SIGNED BY

JERRY SEIXON

TITLE

DISTRICT SUPERVISOR

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 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 Forms C-104 must be filed for each pool in multiple completed wells.

RECEIVED

JUN 4 1982

O.C.A.
HOBBS OFFICE

STEWART BROTHERS DRILLING CO. - DRIFT RECORD

Client:

YATES PETROLEUM CORP.

Well #:

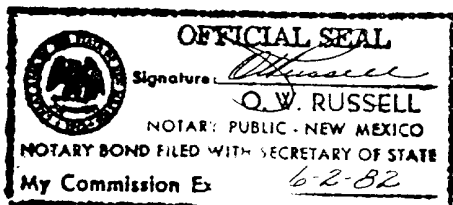
UNION FEDERAL #2

Depth Ft.	Incl.	Date	Comment	Driller
500	$\frac{3}{4}$	4-30-82		P. BACA
1000	1	4-30-82		P. BACA
1500	$\frac{1}{4}$	5-1-82		P. BACA
2000	1	5-3-82		P. BACA
2500	$1\frac{1}{2}$	5-4-82		M. ASHWORTH
3000	$\frac{1}{4}$	5-5-82		M. ASHWORTH
3500	$\frac{1}{4}$	5-6-82		M. ASHWORTH
4000	$1\frac{1}{2}$	5-7-82		M. ASHWORTH
4300	$1\frac{1}{2}$	5-9-82		M. JUAREZ

CERTIFICATION

Stephen M. Stewart 5/13/82
 Pusher Date

Appeared before me this date to
 certify and affirm the above to
 be a true and accurate record.



Notary