

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

46492

AS APPLICABLE	
DISTRIBUTION	
LAND OFFICE	
FILE	
U.S. BUREAU	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	
OPERATOR	

Yates Petroleum Corporation

Address

207 South 4th St., Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name
and address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW IF YOU DO NOT CONCUR
TO THE ABOVE STATE

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formations	Kind of Lease	Lease
Woodpecker SY State	2	Saunders Upper Permo Penn	State, Federal or Fee State	LG-814

Location

Unit Letter H : 1980 Feet From The North Line and 660 Feet From The EastLine of Section 21 Township 14S Range 33E , NMPM, Lea Cour

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)
Texas-New Mexico Pipeline Co.	P.O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Co.	P.O. Box 1589, Tulsa, OK 74101
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
A 21 14s 33e	Yes 6-30-82

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'v.	Diff. R.
(X)	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
5-12-82	6-30-82	10100'	10046'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4212.5' GR	Permo Penn	9790'	9737'					
Perforations	Depth Casing Shoe							
9790-9963 1/2'	10100'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20"	40'	
17-1/2"	13-3/8"	450'	550
12-1/4"	8-5/8"	4200'	500
7-7/8"	5-1/2"	10100'	575
	2-7/8"	9737'	

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 of hole for this depth or be for full 24 hours)

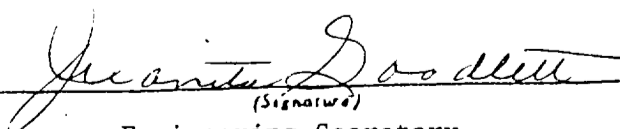
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6-30-82	8-9-82	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	50#	50#	2"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
404	284	120	112

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.



Engineering Secretary

(Title)

8-11-82

(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 16 1982, 19BY ORIGINAL SIGNED BY

JERRY SEXTON

TITLE DISTRICT SUPER.

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 device 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 well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multi-welled wells.