

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	2
SANTA FE	2
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

Operator

Harvey E. Yates Company

Address

P. O. Box 1933, Roswell, New Mexico 88201

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)

Additional to form casinghead gas from  
this well must be obtained from the  
Minerals Management Service.If change 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.
Young Deep Unit	9	N. Young Bonesprings	State, Federal or Fee Federal	NM11118
Location				
Unit Letter		1980 Feet From The	South Line and	660 Feet From The
				West
Line of Section	3	T. 18S	Range 32E	, NMPM, Lea
				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)					
Koch Oil Company	P. O. Box 3609, Midland, Texas					
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)					
Phillips	5B4 Phillips Building, Bartlesville OK 74004					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	L	3	18S	32E	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 Res'v.	Diff. Res.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
1/13/83	1/12/84		9460'		8798'			
Elevation (D.F., R.A.B., R.T., C.R., etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
879' KB	Bone Springs		8753'		8583'			
Perforations						Depth Casing Shoe		
8753' to 8789' (36' 9 holes)								

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	665'	350 SXS
11	8 5/8	3630'	2100 SXS
7 7/8	5 1/2	9460'	700 SXS

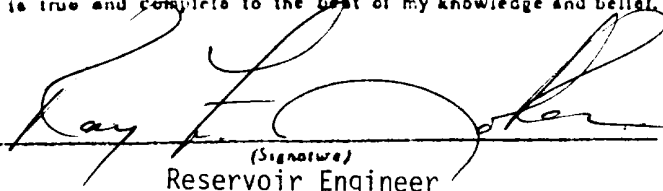
TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL(Test must be after recovery of total volume of load oil and must be equal to or exceed top all  
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1/12/84	1/12/84	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	200#	-	16/64"
Actual Prod. During Test	Oil-Bble.	Water-Bble.	Gas-MCF
	150	0	200

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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.  
(Signature)  
Reservoir Engineer

(Title)

January 27, 1984

(Date)

## OIL CONSERVATION DIVISION

APPROVED

JAN 30 1984

, 19

ORIGINAL SIGNED BY JERRY-SEXTON

BY

DISTRICT SUPERVISOR

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen  
well, this form must be accompanied by a tabulation of the deviated  
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all  
able 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.Separate Forms C-104 must be filed for each pool in multi-  
completed wells.

RECEIVED  
JAN 30 1984  
HOLLOMAN

WELL NAME AND NUMBER YOUNG DEEP UNIT #9

1003

LOCATION Section 3, Township 18 South, Range 32 East  
(New Mexico give U.S.T&R: Texas give S, BLK, SURV. and TWP)OPERATOR HEYCODRILLING CONTRACTOR MORANCO Drilling, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

<u>Degrees and Depth</u>	<u>Degrees and Depth</u>	<u>Degrees and Depth</u>	<u>Degrees and Depth</u>
<u>3/4 300</u>	<u>1/2 4718</u>	<u>2 1/2 7180</u>	<u>3 8224</u>
<u>1/2 650</u>	<u>3/4 5007</u>	<u>3 7247</u>	<u>3 1/4 8305</u>
<u>3/4 960</u>	<u>3/4 5340</u>	<u>3 1/4 7305</u>	<u>3 1/4 8435</u>
<u>1 1444</u>	<u>1 5584</u>	<u>2 3/4 7365</u>	<u>3 1/4 8604</u>
<u>1/4 1881</u>	<u>1 1/2 5802</u>	<u>3 7436</u>	<u>3 1/4 8760</u>
<u>3/4 2129</u>	<u>1 3/4 6082</u>	<u>3 1/4 7560</u>	<u>3 1/4 8790</u>
<u>3/4 2670</u>	<u>2 6210</u>	<u>3 1/4 7675</u>	<u>4 9075</u>
<u>1 1/2 3006</u>	<u>2 6363</u>	<u>3 3/4 7718</u>	<u>3 1/4 9192</u>
<u>1 3185</u>	<u>2 6550</u>	<u>3 1/2 7821</u>	<u>3 9460</u>
<u>3/4 3680</u>	<u>2 1/4 6735</u>	<u>3 7944</u>	
<u>3/4 3942</u>	<u>2 6870</u>	<u>3 8070</u>	
<u>1 4262</u>	<u>2 1/4 7020</u>	<u>4 8150</u>	

Drilling Contractor MORANCO Drilling, Inc.By Wiley Gilmore  
Wiley Gilmore, Marketing ManagerSubscribed and sworn to before me this 22<sup>nd</sup> day of November 1983

My Commission expires:

10-25-87Judith A. Liuzza  
Notary Public Judith A. Liuzza  
Lea County, New Mexico

RECEIVED  
JAN 26 1984  
HOLBY OFFICE