

OIL CONSERVATION DIVISION

P. O. BOX 2086

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Oil (If Gas, explain)

**CASINGHEAD GAS MUST NOT BE
FLARED AFTER 8/1/82
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED.**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.
Pronghorn Unit	2	Wildcat	State, Federal or Free State	L-4097

Location
Unit Letter H : 1980 Feet From The North Line and 660 Feet From The EastLine of Section 30 Township 22S Range 33E , NMCM, Lea 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 Crude Oil Purchasing Co. Box 159, Artesia, NM 88210Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ 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
	H	30	22s	33e	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 Reservoir, Different
	X		X				
Date Spudded 10-24-81 Rat Hole	Date Compl. Ready to Prod.	Total Depth	Perforations	Flow Test	Flow Test	Flow Test	Flow Test
11-18-81	6-7-82	15450'	10563-10620'	10509'	10509'	10509'	10509'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Testing Depth	Depth Casing Shoe	Depth Casing Shoe	Depth Casing Shoe	Depth Casing Shoe
3674'	Bone Springs	10563'	10509'	12150'	12150'	12150'	12150'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24"	20"	50'	
17-1/2"	13-3/8"	711'	750
12-1/4"	10-3/4"	4848'	2050
9-1/2"	7-5/8"	12150'	1105

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of 100% volume of lead oil and must be equal to or exceed top oil
OIL WELL

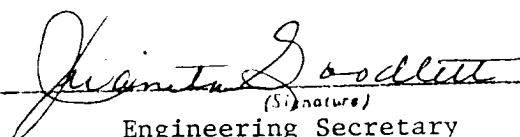
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Choke Size
6-2-82	6-7-82	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	-	-	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
5	5	0	TSTM

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.


(Signature)
Engineering Secretary

6-9-82

(Date)

OIL CONSERVATION DIVISION

JUN 28 1982

APPROVED _____, 19

ORIGINAL SIGNED BY

BY JERRY SEXTON

TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with RULE 11.1.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the division tests taken on the well in accordance with RULE 11.1.

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 completion name or number, or transporter or other such change of condition. The rate forms must be filed for each pool in which