

OIL CONSERVATION DIVISION

P. O. BOX 2608

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

COOPERATION	
LAND AREA	
FILE	
VEHICLE	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
OPERATION OFFICE	

Operator

Yates Petroleum Corporation

Address

207 So. 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): **MUST NOT BE
2/1/82
EXEMPTED FROM EXCEPTION TO R4070**

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Brent US State	Well No. 1	Formation, including Formation Sandhills Grayburg Sh	Kind of Lease State, Federal or Fee State	Lease No. 16 718
Location Unit Letter <u>K</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>32</u> Township <u>20S</u> Range <u>29E</u> NMPM <u>Lot</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Box 154, Artesia, NM 88210
Name 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 <u>K</u> Sec. <u>32</u> Twp. <u>20S</u> Rge. <u>29E</u> Is gas naturally connected? <u>No</u> When

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'ty. ☐	Diff. Res'ty. ☐
Date Spudded 8-10-82	Date Compl. Ready to Prod. 12-1-82	Total Depth 4500'	P.B.T.D. 4445'					
Elevations (DF, RKB, RT, GR, etc.) 3553' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4348'	Tubing Depth 4389'					
Perforations 4348-60'						Depth Casing Shoe 4500'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	20"	60'	
7-7/8"	8-5/8"	1180'	900
	4-1/2"	4500'	1455
	2-3/8"	4389'	

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 allowable for this depth or be for full 24 hours)

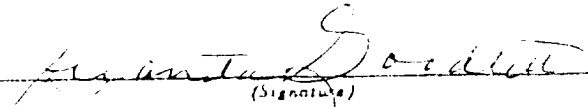
Date First New Oil Run To Tanks 11-15-82	Date of Test 12-1-82	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 63	Oil-Gals. 18	Water-Gals. 45	Gas-MCF 2.5

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)
Production Supervisor
(Title)
12-10-82
(Date)

OIL CONSERVATION DIVISION

APPROVED **DEC 14 1982**
ORIGINAL SIGNED BY
BY **JERRY SEXTON**
TITLE **DISTRICT 1 SUPR.**

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.
Form C-104 must be filed for each pool in multiple completions.