

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

C... CONSERVATION DIV
811 S. 1st ST
ARTESIA, NM 88210-2001
FORM APPROVED
Budget Bureau No. 1004-0135
10-2001, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

| | |
|--|---|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No. NM-83068 |
| 2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471 | 6. If Indian, Allottee or Tribe Name |
| 3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210 | 7. If Unit or CA, Agreement Designation |
| 4. Location of Well (Footage, Sec., T., R., M., of Survey Description) Surface: 1980' FNL & 910' FWL (Unit E, SWNW) SWNE Bottom Hole: 1980' FNL & 2405' FEL (Unit G, SEWW) SJS Section 27-T20S-R29E | 8. Well Name and No. Zinnia Federal Unit #1 |
| | 9. API Well No. 30-015-27939 |
| | 10. Field and Pool, or Exploratory Area Und Strawn and Undesignated Wolfcamp |
| | 11. County or Parish, State Eddy Co., NM |

| CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
|---|--|--|
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input checked="" type="checkbox"/> Other Commingled | <input type="checkbox"/> Dispose Water |
| (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | | |

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

This well is downhole commingled through perforations 9902-10216' (Wolfcamp) and 10956-10988' (Strawn).

Approval from Bureau of Land Management and NMOCD Order No.: DHC-1143 to commingle Wolfcamp and Strawn formations.

14. I hereby certify that the foregoing is true and correct

Signed

Rusty Klein

Title Production Clerk

Date

Dec 15, 1995

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: