

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-57164	
2. NAME OF OPERATOR Yates Drilling Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 105 South 4th Street, Artesia, NM 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 530' FNL & 1930' FEL		8. FARM OR LEASE NAME Bejunje Federal	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6824' ungraded ground		10. FIELD AND POOL, OR WILDCAT Undesignated Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec.-24-23N-9W	
		12. COUNTY OR PARISH San Juan	13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
(Other)	<input type="checkbox"/>

PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>

WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>

REPAIRING WELL	<input type="checkbox"/>
ALTERING CASING	<input type="checkbox"/>
ABANDONMENT*	<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. 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.)

2-6-91 TD 5035'. RUPU. Drilled out and tagged PBTD at 4989'. Circ. hole clean.  
2-8-91 Displaced hole w/ 120 bbls. 2% KCL. WIH on wireline and perf. 25 - .50" holes, as follows: 4889', 79', 77', 70', 63', 61', 59', 38', 36', 34', 32', 22', 15', 09', 06', 03', 4786', 79', 74', 72', 70', 63', 58' and 54'.  
2-9-91 Straddle 1st perfs 4859'-89'. Broke down w/ 2% KCL wtr. Acidized w/500 gals. 7½% HCL acid and additives, spacing out 12 7/8" ball sealers thru acid. Straddle 2nd set of perfs at 4803-38'. Spotted 50 gals. 7½% acid across perfs. Acidized w/450 gals. 7½% acid, spacing out 10 ball sealers. Straddle upper set of perfs at 4754'-86'. Acidized w/500 gals 7½% HCL, spacing out 12 ball sealers.  
2-10-91 Frac'd in 2 stages, as follows: 1st stage w/145000# 20/40 & 30,000# 12/20 sand as proppent and 104,650 gals. of 30# gel system as carrier. Set BP at 4550'. WIH on wireline and perf 15-.50" holes as follows: 4481', 77', 70', 61', 55', 52' & 47'. Spotted 50 gals acid down pkr. Frac'd 2nd stage, as follows: 29,000# 20/40 & 6,000# 12/20 sand as proppent and 23,600 gals. 30# gel as carrier.  
2-11-91 Well flowing back load.

RECEIVED  
MAR 04 1991

OIL CON. DIV  
DIST. 3

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

SIGNED Karen J. Leshman

TITLE Production Clerk

DATE 2-19-91

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE FEB 28 1991

NMOCD

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

BY Pat