

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on reverse side)

Modified Form No.  
NMD60-3160-4

5. LEASE DESIGNATION AND SERIAL NO.  
NM 63016

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Belco AIA Federal

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
Undes. Bone Springs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Unit J, sec. 14-T20S-R32E

12. COUNTY OR PARISH  
Lea

13. STATE  
NM

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  GAS WELL  OTHER

2. NAME OF OPERATOR  
YATES PETROLEUM CORPORATION

3a. Area Code & Phone No.  
505/748-1471

3. ADDRESS OF OPERATOR  
105 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
1980' FSL & 1980' FEL, Sec. 14-20S-32E  
*Unit J*

14. PERMIT NO.  
30-025-26826

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3539' GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Perforate, Treat Bone Springs

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

RU wireline and lubricator. Perforated Bone Springs 10225-10233' (4 SPF) and 10056-10100' (2 SPF) Set RBP 10275, tested to 2000 psi. Set packer above at 10175'. Acidized perfs 10225-10233' w/2000 gals 15% NEFE HCL acid and 40 ball sealers. Swabbed well - recovered 98 bbls (80 BW and 18 BO) .

Moved RBP to 10150', tested to 2000 psi, pulled packer to 10000', tested backside to 1000 psi. Acidized perfs 10056-10100' w/5000 gals 15% NEFE HCL acid and ball sealers. Swabbed to seating nipple. Made 1 and 2 hour runs. Recovered 4 BW and 1/2 BO with show of gas.

Above work - 2-15-91 to 2-25-91.

ACCEPTED FOR RECORD  
*As*  
MAR 1 1991  
C. R. AND NEW MEALS

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

SIGNED *D. Smith* TITLE Production Supervisor DATE 3-1-91

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side