

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 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~~ ^{O. C. D.} reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Workover - evaluate for oil well.	5. Lease Designation and Serial No. NM 12833
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., or Survey Description) Unit F, 1980' FNL, 1980' FWL, Sec. 11-T19S-R25E	8. Well Name and No. Rio Penasco MF Fed. #1
	9. API Well No. 30-015-23074
	10. Field and Pool, or Exploratory Area Undes. Canyon
	11. County or Parish, State Eddy, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Add perfs to existing zone, evaluate for pump.</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)*

Current perforations at 7592-7656'. Propose to add perforations and treat as follows:
7962-8006' w/10 shots. Acidize w/1000 gals 15% NEFE.
7775-7885' w/13 shots. Acidize w/2000 gals 15% NEFE
7706-7720' w/4 shots. Acidize w/500 gals 15% NEFE.
Swab test zone. Move RBP to ± 8100' and set packer above top perf @ 7592'. Swab test all perfs and evaluate for the possibility of a sub-pump or a rod pump.
Put well on production.

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

Signature: [Signature] Title: Production Supervisor Date: 5-28-92

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

clsf