

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
Artesia, NM 88210

CONTACT RECEIVING:

OFFICE FOR NM Oil Cons. R  
OF COPIES FOR  
Bureau (other instructions on re-  
verse side)

BLM Roswell District  
Modified Form No.  
NM-3160-4

dsf

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>   |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM-18819                              |
| 2. NAME OF OPERATOR<br>YATES PETROLEUM CORPORATION   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |
| 3. ADDRESS OF OPERATOR<br>105 South 4th St., Artesia, NM 88210   |  | 7. UNIT AGREEMENT NAME   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>660' FSL & 1650' FEL |  | 8. FARM OR LEASE NAME<br>Mountain VR Federal Com                             |
| 14. PERMIT NO.<br>30-005-61824   |  | 9. WELL NO.<br>1   |
| 15. ELEVATIONS (Show whether OF, RT, GR, etc.)<br>3518.6' GR   |  | 10. FIELD AND POOL, OR WILDCAT<br>South Pecos Slope Abo                      |
|  |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Unit 0, Sec. 8-T10S-R25E |
|  |  | 12. COUNTY OR PARISH<br>Chaves   |
|  |  | 13. STATE<br>NM  |

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Change well name

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.)

CHANGE WELL NAME FROM: MOUNTAIN VR FEDERAL #1

TO: MOUNTAIN VR FEDERAL COM #1

COMMUNIZATION AGREEMENT NO. SCR-440



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

SIGNED Guarante Asad

TITLE Production Supvr.

DATE 12-6-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side