

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

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL NO.  
NM 15294

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"/>	2. NAME OF OPERATOR Yates Petroleum Corporation	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 660' FSL & 660' FEL, Sec. 8-7S-26E	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Bosque Grande SQ Federal	9. WELL NO. 3	10. FIELD AND POOL, OR WILDCAT Pecos Slope Abo	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit P, Sec. 8-T7S-R26E	12. COUNTY OR PARISH Chaves	13. STATE NM
14. PERMIT NO. API #30-005-61841	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3591.4' 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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) Gas connected for sales	
(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.)\*

GAS CONNECTED TO PIPELINE FOR 1ST PRODUCTION & SALES 5-17-88.

PURCHASER - TRANSWESTERN PIPELINE COMPANY  
TRANSPORTER - YATES PETROLEUM CORPORATION

RECEIVED

MAY 18 8 14 AM '88  
BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

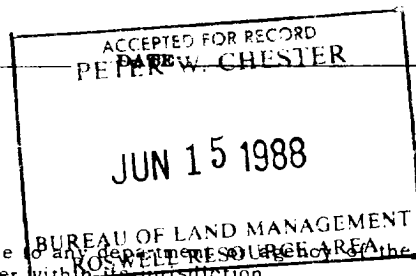
18. I hereby certify that the foregoing is true and correct

SIGNATURE Peter W. Chester TITLE Production Supervisor DATE 5-17-88

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:



\*See Instructions on Reverse Side