

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

(CONTACT RECEIVING)

NM Oil Cons. 98103
OFFICE FOR
OF COPIES R
AFD
Drawings (See instructions on re-
verse side)

RIM Roswell District
Modified Form No.
NMD60-3160-4

45F

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 ☐		3. LEASE DESIGNATION AND SERIAL NO. NM-18819
2. NAME OF OPERATOR YATES PETROLEUM CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 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. See also space 17 below.) At surface 1980' FSL & 1980' FEL		8. FARM OR LEASE NAME Mountain VR Federal Com
14. PERMIT NO. 30-005-61969		9. WELL NO. 3
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3523.9' GR		10. FIELD AND POOL, OR WILDCAT South Pecos Slope Abo
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit K, Sec. 8-T10S-R25E
		12. COUNTY OR PARISH Chaves
		13. STATE 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 #3
TO: MOUNTAIN VR FEDERAL COM #3

COMMUNIZATION AGREEMENT NO. - RNM-107



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

SIGNED Samanta Sordillo

TITLE Production Supvr.

DATE 12-6-90

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side