Form 3160-5
November 1983)
(Formerly 9-331)

UI /ED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM Oil Cons. Co. ission
SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)
Artesia, NM 88210

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM 2351

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME

1.

OIL WELL ☐	GAS WELL ☒	OTHER

2. NAME OF OPERATOR
Yates Petroleum Corporation √

RECEIVED

8. FARM OR LEASE NAME
Federal HY

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

9. WELL NO.
10

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1650' FSL & 1980' FWL

JUN 02 '89

O. C. D.
ARTESIA OFFICE

10. FIELD AND POOL, OR WILDCAT
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit K, Sec. 28-T7S-R25E

14. PERMIT NO.
API #30-005-62110

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3651.1' GR

12. COUNTY OR PARISH
Chaves

13. STATE
NM

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other)	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(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.) *

WELL CONNECTED TO PIPELINE FOR 1ST PRODUCTION AND SALES   4-25-89

TRANSWESTERN PIPELINE COMPANY PURCHASER AND TRANSPORTER.

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

SIGNED _[signature]_   TITLE   Production Supervisor   DATE   4-25-89

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE _____

JUN 1 1989

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side