

Form 3160-5
(July 1989)
(Formerly 9-331)BLM Roswell District
Modified Form No.
NMOG-3160-4UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Yates Petroleum Corporation		8. FARM OR LEASE NAME Comanche Hills ZU Federal	
3. ADDRESS OF OPERATOR 105 South 4th St., Artesia, NM 88210		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL & 1980' FWL, Sec. 25-10S-25E		10. FIELD AND POOL, OR WILDCAT South Pecos Slope Abo	
14. PERMIT NO. API #30-005-62128		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3712' GR	
11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Unit N, Sec. 25-T10S-R25E		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	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input checked="" type="checkbox"/>	Central Delivery Point Wells	<input checked="" type="checkbox"/>

(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.)

Due to economic conditions with gas purchaser, Yates Petroleum Corporation has been required to lay gathering lines and set allocation meters at each well that produces into a common line. We request approval to commingle the following wells:

Comanche Hills ZU Federal #1, located SE/SW, Sec. 25-T10S-R25E
Wanda ZT Federal #1, located SW/NW, Sec. 31-T10S-R25E
Comanche Hill VE State #1, located NW/NE, Sec. 36-T10S-R25E

The gas is measured prior to measurement for sales for marketing gas to the pipeline company. The sale point is located at McClellan's, McClellan JJ #1, located NW/SE, Sec. 1-T10S-R25E.

Yates Petroleum Corporation conducts quarterly calibration tests on all meters. Test results will be furnished to the Bureau of Land Management upon request.

Transwestern Pipeline Company conducts quarterly tests on TW's meters and semi-annual gas analysis tests.

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

SIGNED John A. DoolittleTITLE Production SupervisorDATE 9-5-89

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED
DATE PETER W. CHESTER

SEP 8 1989

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side