

NM OIL CONS. COMMISSION  
UN I T E D STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

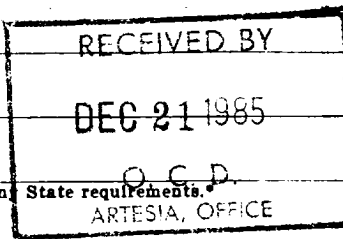
Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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**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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR Yates Petroleum Corporation ✓</p> <p>3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with an State requirements. See also space 17 below.) At surface 1980 FNL &amp; 660 FEL, Sec. 17-T7S-R26E</p> <p>14. PERMIT NO. API # 30-005-62264</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. NM 15294</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Bosque Grande SQ Federal</p> <p>9. WELL NO. 2</p> <p>10. FIELD AND POOL, OR WILDCAT Und. Pecos Slope Abo</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit H, Sec. 17-T7S-R26E</p> <p>12. COUNTY OR PARISH Chaves</p> <p>13. STATE NM</p>
<p>15. ELEVATIONS (Show whether DF, HT, GR, etc.) 3583' GR</p>		



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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Production Csg. Perforate</u> <input checked="" type="checkbox"/>	
(Other) <input 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.)\*

11-23-85. Ran 106 joints 4-1/2" 9.5# J-55 casing set 4250'. 1-regular guide shoe set 4250'. Float collar set 4209'. Cemented w/430 sx Class "C" + .5% CF-1 + 2% KCL. Compressive strength of cement - 950 psi in 12 hrs. PD 9:30 PM 11-23-85. Bumped plug to 1000# for 30 minutes, released pressure, float and casing held okay. WOC 17 days.

12-10-85. Ran 1500' of 1" pipe. Cemented w/300 sx Pacesetter Lite. WIH and perforated 24 .42" holes (2 SPF) as follows: 3945-47' (4 holes); 3853-59' (12 holes); 3788-90' (4 holes); 3712-14' (4 holes). Acidized w/2000 gals 7 1/2% Spearhead acid as follows: 3945-47' w/500 gals acid; 3853-59' w/500 gals acid; 3788-90' w/500 gals acid; 3712-14' w/500 gals acid.

12-11-85. Frac'd perms 3712-3947' w/60000# gelled KCL, 120000# 20/40 sand, and 1000 gals 7 1/2% NEFE acid.

12-12-85. Swabbing well and recovering load.

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

SIGNED Peter W. Chester TITLE Production Supervisor DATE 12-16-85

(This space for Federal or State office use)

APPROVED BY PETER W. CHESTER TITLE   DATE

CONDITIONS OF APPROVAL, IF ANY:

DEC 20 1985

\*See Instructions on Reverse Side

BUREAU OF LAND MANAGEMENT  
WELL RESOURCE AREA