

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

JUN 14 1985

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NEW OFFICE CONSTRUCTION  
SUBMIT INSTRUCTIONS  
By Other Instructions  
Artesia, NM 88210

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

45F

O. C. DSUNDY, NOTICES AND REPORTS ON WELLS

Use this form for proposals to drill or to deepen or plug back to a different reservoir.  
ARTESIA, OFFICE APPLICATION FOR PERMIT for such proposals.

1. 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 Bajada ACM Federal
3. ADDRESS OF OPERATOR 207 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 1980 FSL & 1980 FWL, of Sec. 10-5S-23E	10. FIELD AND POOL, OR WILDCAT Wildcat Abo
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4303.6' GR
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit K, Sec. 10-T5S-R23E
	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 COMPLETE <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 checked="" 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 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.) \*

Spudded 26" hole at 7:45 PM 5-30-85 with Frank's Rat Hole.  
Resumed drilling 14-3/4" hole at 7:00 AM 6-1-85.  
6-2-85. Ran 21 joints 10-3/4" 40.5# J-55 casing set 858'. Guide shoe set 858'.  
Regular insert float set 810'. Cemented w/400 sx Pacesetter Lite + 1/2#/sack  
Celloseal + 3% CaCl2. Tailed in w/200 sacks Class C + 2% CaCl2. Compressive strength  
of cement - 1250 psi in 12 hrs. PD 2:30 PM 6-2-84. Bumped plug to 1000 psi, released  
pressure and float held okay. Cement circulated 50 sacks to pit. WOC. Drilled out  
2:30 AM 6-3-85. WOC 12 hrs. NU and tested to 1000 psi for 30 minutes, OK. Reduced  
hole to 7-7/8". Drilled plug and resumed drilling.

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

SIGNED Peter W. Chester

TITLE Production Supervisor

DATE 6-4-85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD  
PETER W. CHESTER  
TITLE \_\_\_\_\_

DATE \_\_\_\_\_

JUN 12 1985

\*See Instructions on Reverse Side  
BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA