

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

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

ckf

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | <div>RECEIVED BY JAN 6 1986 O. C. D. ARTESIA, OFFICE</div> | 7. UNIT AGREEMENT NAME |
| 2. NAME OF OPERATOR Yates Petroleum Corporation ✓ | | 8. FARM OR LEASE NAME Cedar Lake ADI Federal Com |
| 3. ADDRESS OF OPERATOR 207 South Fourth Street - 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 2140' FNL and 660' FWL (Unit E) | | 10. FIELD AND POOL, OR WILDCAT Undes. Cedar Lake Morrow |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3617' GR | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 26-T17S-R30E |
| | | 12. COUNTY OR PARISH Eddy |
| | | 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 checked="" 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 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.)*

Verbal permission was received by Mr. Tim Bussell with YPC from Mr. Jerry Queen with the BLM in Carlsbad, New Mexico, on December 30, 1985, to change casing as follows:

FROM:
12-1/4" hole 8-5/8" 24# J-55 Approx. 3575' 1100 sacks - circulate

TO:
11" hole 8-5/8" 24# J-55 Approx. 4500' 1100 sacks - circulate

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

SIGNED Rusty [Signature]

TITLE Regulatory Secretary

DATE Dec. 30, 1985

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE 1-3-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side