

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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	RECEIVED BY DEC 22 1986 O. C. D. ARTESIA, OFFICE	5. LEASE DESIGNATION AND SERIAL NO. NM 65392
2. NAME OF OPERATOR Yates Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 105 South 4th St., Artesia, NM 88210		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 800' FEL, Sec. 30-T18S-R27E		8. FARM OR LEASE NAME Compromise AEJ Federal Com
14. PERMIT NO. API #30-015-25665	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3281' GR	9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT Und. East Lake Morrow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit H, Sec. 30-T18S-R27E
		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 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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	Production Casing, Perforate <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.) *

TD 9800'. Ran 239 joints 5-1/2" casing as follows: 35 joints 5-1/2" 17# N-80; 157 joints 5-1/2" 17# J-55 and 47 joints 5-1/2" 17# N-80 casing set 9800'. Guide shoe set 9800', float collar set 9760'. Cemented w/550 sacks Class "H" w/.6% Halad-22, .3% CFR-2 and 3% KCL (yield 1.15; weight 15.4.) PD 6:15 AM 11-30-86. Bumped plug to 1900 psi, released pressure, float and casing held okay. WOC. Perforated 9370-82' w/16 .50" holes (2 SPF). Acidized perforations 9370-82' w/1500 gals 7-1/2% MS acid and N₂.

ACCEPTED FOR RECORD

DEC 17 1986

CARLSBAD, NEW MEXICO

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

SIGNED Carla D. Doolittle

TITLE Production Supervisor

DATE 12-15-86

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side