

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS C MISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

415F

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-82845
Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471	6. If Indian, Allottee or Tribe Name
Address and Telephone No. 105 South 4th St., Artesia, NM 88210	7. If Unit or CA, Agreement Designation
Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 1980' FEL of Section 10-T19S-R25E (Unit J, NWSE)	8. Well Name and No. Polo AOP Federal Com #2
	9. API Well No. 30-015-20334
	10. Field and Pool, or Exploratory Area Boyd Morrow
	11. County or Parish, State Eddy Co., NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Acidize perforations
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

3 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.)
10-27-94 - Swabbed. Load tubing. Release packer, nipple down tree and nipple up BOP. TOOH. TIH w/packer and RBP. Straddle perforations 9024-9095'. Set RBP at 9105' and packer at 8915'. Nipple down BOP and nipple up tree. Set packer and test annulus to 1000 psi. Swab well down to packer. Acidized perforations 9024-9095' with 1500 gallons 7-1/2% Morrow acid with 1000 scf/bbl nitrogen and ball sealers. Nipple down tree saver and opened well up for flow test.

4 I hereby certify that the foregoing is true and correct		
Signed <u>Rusty Klein</u>	Title <u>Production Clerk</u>	Date <u>Oct. 27, 1994</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		