

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on re-  
verse side)

BLM Roswell District  
Modified Form No.  
NND60-3160-4

415F

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 type="checkbox"/> OTHER <input type="checkbox"/> SWD		5. LEASE DESIGNATION AND SERIAL NO. NM 36500	
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 810' FNL & 2180' FWL, Sec. 14-19S-25E		8. FARM OR LEASE NAME Cotton MX Federal	
14. PERMIT NO. 30-015-23315		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3430' GR		10. FIELD AND POOL, OR WILDCAT Boyd-Canyon	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., N., OR BLK. AND SURVEY OR AREA Unit C, Sec. 14-T19S-R25E	
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.)		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

JUL 27 '90

ARTESIA, OFFICE

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 PLANE	<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 type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	Perforate, treat existing zone	<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.)

6-22-90. Acidized perforations 7746-7915' w/10000 g. NEFE acid w/500# block and 50 ball sealers.  
7-3-90. RUPU. POOH w/plastic coated tubing. Drilled junk and retainer at 7710' and cement to 7716'. TIH to 7930' and circulate clean.  
7-5-90. Perforated 7746-7915' w/41 .50" holes as follows: 7746, 47, 48, 49, 50, 58, 59, 60, 74, 75, 76, 98, 99, 7800, 03, 04, 05, 09, 10, 11, 17, 18, 31, 32, 33, 34, 35, 92, 93, 94, 95, 96, 7905, 06, 07, 10, 11, 12, 13, 14 and 7915'. Acidized with 12200 gals 20% NEFE acid.  
7-6-90. Lay down workstring and tools. TIH w/5-1/2" nickel plated Uni VI packer and crossover (no seating nipple) I.D. 1.97 and 243 joints 2-7/8" plastic coated tubing as per original installation. Load annulus with 130 bbls packer fluid and test to 500 psi, OK. Witnessed by Mike Stubblefield, NMOCD, Artesia, NM.  
Returned to production for disposal.

Perforations open: 7686-7710'; 7746-7915'

Ad

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

SIGNED Guillermo J. Adelt

TITLE Production Supervisor

DATE 7-18-90

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side