				11 Mar 36100
orm 3160-5 lune 1 9 90)	DEPARTMENT O	STATES F THE INTERIOR ID MANAGEMENT	international States (FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No.
Do not use this form	for proposals to drill o	D REPORTS ON WELLS r to deepen or reentry to a c ERMIT for such proposal	different reservoir. s	NM-12246 6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE				7. If Unit or CA, Agreement Designation
I. Type of Well Oil X Gas Well X Well Other				8. Well Name and No.
2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471)				Oakason NV Fed. #1 9. API Well No.
 Address and Telephone No. 105 South 4th St., Artesia, NM 88210 Location of Well (Footage, Sec., T., R., M., or Survey Description) 				30-015-23438 10. Field and Pool, or Exploratory Area Hoag Tank Morrow
	1			11. County or Parish, State
)' FEL of Section	· · · · · · · · · · · · · · · · · · ·		Eddy Co., NM
2. CHECK API	PROPRIATE BOX(s)	O INDICATE NATURE O	TYPE OF ACTION	RT, OR OTHER DATA
TYPE OF SUE	BMISSION		<u>`</u>	
Notice of Inte		Abandonment Recompletion Plugging Back		Change of Plans Change Construction Non-Routine Fracturing
🗌 Final Abando	onment Notice	Casing Repair Altering Casing Other <u>Re-fra</u> perfs	c Morrow & add	Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
give subsurface locations	and measured and true vertical d	tinent details, and give pertinent dates, incl epths for all markers and zones pertinent t	to this work.)*	Completion or Recompletion Report and Log form.) g any proposed work. If well is directionally drilled
Foam frac'd pe	rforations 9022-9	unit. Tested casing 038' with 95 tons of ned to production.	and tubing. S CO2 and 225 sa	et packer and tested. cks Carbolite sand.
9005'. Bled t with KCL water tree and nippl tested tubing .42" holes. T BOP. Installe gallons 7-1/2% 8937-8949' wit	ubing down. Load . Tested to 500# ed up BOP. Set 1 to 1000#. Releas IH w/packer and R d tree and flange Morrow acid with	. Released on/off to .81" standing valve i ed on/off tool. TOOH BP. Set RBP at 8980' d up. Swabbed. Acid	water. Teste ool. Reverse o n on/off tool . WIH and per and packer at lized perforati cogen. Swabbed	d to 1000#. Loaded csain ut to pit. Nippled down at 8996'. Loaded and forated 8937-8949' w/9 8850'. Nippled down ons 8937-8949' with 1000 . Frac'd perforations
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14. I hereby certify that the fore Signed	poing is true and correct		Clerk	DateOct. 8, 1993
(This space for Federal or S Approved by Conditions of approval, if a		Title	ED FOR RECOF	Date
Conditions of approval, if a	nakes it a crime for any person kn	owingly and willfully to make to any depa CARLSB/ *See Instruction on Revers	D. NEW LIEX	ed States any false, fictitious or fraudulent sta