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Form 3160-5 (June 1990)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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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 dr	AND REPORTS ON WELLS  O. C. D.  ill or to deepen or reentry to a different reservoir.  R PERMIT—" for such proposals	NM 12246 6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE  1. Type of Well		7. If Unit or CA, Agreement Designation
Oil Well Well Other RECOMPLETION		8. Well Name and No.
2. Name of Operator		Oakason NV Federal #2
YATES PETROLEUM CORPORATION (505) 748-1471		9. API Well No.
3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210		30-015-23594
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		10. Field and Pool, or Exploratory Area
Unit F, 1980' FNL, 2310' FWL, Sec. 27-T19S-R24E		Undes. Atoka 11. County or Parish, State
onit F, 1900 FNL, 2510 FWL,	Sec. 27-1193-R24E	Eddy, NM
12. CHECK APPROPRIATE BOX(	s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
<b>—</b>	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	X Other Perforate, Treat	Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
	Il pertinent details, and give pertinent dates, including estimated date of starting all depths for all markers and zones pertinent to this work.)*	g any proposed work. If well is directionally drilled,
RBP at 8638' and tested to 20 12-11-91. Perforated 8475-85 81, 82, 8527, 28, 29, 30, 33, perfs 8475-8527'. Started b	19'. Dropped down and unset RBP at 8 00 psi. Unset packer and TOH w/2-3/8 38' w/1850" holes as follows: 84 34, 35, 36, 37 and 8538'. Spot 2 bb reakdown on perfs 8527-8538'. Perfs 980 psi on 1/4" choke = 1460 mcfd. 12-11-91.	" tubing. 75, 76, 77, 78, 79, 80, 1s 7½% Morrow acid across
14. I hereby certify that the foregoing is true and correct		
Signed and and	Title Production Supervisor	Date12-13-91
(This space for Federal or State office use)		
Approved by	Title	Date
Conditions of approval, if any:	.100	
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