

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

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

C/SF

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 <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 14118
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 990' FNL & 1300' FWL	8. FARM OR LEASE NAME Allison CQ Federal
14. PERMIT NO. API #30-015-24133	9. WELL NO. 9
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3691' GR	10. FIELD AND POOL, OR WILDCAT Und. Hoag Tank Morrow
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit D, Sec. 15-T19S-R24E
	12. COUNTY OR PARISH Eddy
	13. STATE NM

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APR 11 '88

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Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Gas connected for sales

(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.)*

WELL CONNECTED TO PIPELINE FOR 1ST SALES - 4-4-88.

YATES PETROLEUM CORPORATION - TRANSPORTER

TRANSWESTERN PIPELINE COMPANY - PURCHASER

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

SIGNATURE [Signature] TITLE Production Supervisor DATE 4-4-88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side