

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions re-
verse side)

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

dsf

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
YATES PETROLEUM CORPORATION 505/748-1471

3. ADDRESS OF OPERATOR
105 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 1980' FNL & 1980' FWL, Sec. 24-T19S-R24E

14. PERMIT NO.
30-015-26096

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3601' GR

5. LEASE DESIGNATION AND SERIAL NO

NM 26864

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6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NOV 28 '89

7. UNIT AGREEMENT NAME

O. C. D.

8. FARM OR LEASE NAME

ARTESIA, OFFICE

Roden GD Federal Com

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Und.
North Dagger Draw-Upper Penn

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Unit F, Sec. 24-19S-24E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Report 1st production new zone X

(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.)*

REPORT 1ST PRODUCTION 11-16-89 FROM CANYON PERFORATIONS 7636-7747'.

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

SIGNED

TITLE Production Supvr.

DATE 11-22-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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NOV 24 11 54 AM '89