

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division
201 S. 1st
Artesia

CLSF

1-2834 FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NM-26864

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Roden GD Federal Com #3

9. API Well No.
30-015-26096

10. Field and Pool, or Exploratory Area
Hoag Tank Morrow

11. County or Parish, State
Eddy Co., NM

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
YATES PETROLEUM CORPORATION (505) 748-1471

3. Address and Telephone No.
105 South 4th St., Artesia, NM 88210

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 1980' FWL of Section 24-T19S-R24E (Unit F, SENW)

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Squeeze Canyon perfs & return well to Morrow
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

2-10-99 - Moved in and rigged up pulling unit.
 2-11-99 - TOOH with rods. Pumped 250 bbls 2% KCL. Could not load casing. Nippled up BOP. Released tubing anchors. Shut down due to wind.
 2-12-99 - TOOH with tubing and tubing anchor. TIH with bit, scraper and tubing. Tagged RBP at 8747'. TOOH with tubing, scraper and bit.
 2-13-99 - Rigged up wireline. TIH and tagged RBP and dumped 2 sacks and on top of RBP. TIH with cement retainer and set retainer at 7600'. Rigged down wireline. Rigged up tubing testers. TIH with stinger and tubing, testing tubing to 6000 psi. Sting into retainer. Pumped 200 sacks thixotropic with 1% calcium and 100 sacks "H" Neat - perfs. 7636-7747' (Canyon) would not squeeze. Displaced cement 10 bbls. Pumped 150 sacks "H" Neat. Would not squeeze. Displaced cement 10 bbls. Sting out of retainer. Reversed 70 bbls to ensure no cement in tubing. Pulled 4 stands. Shut down.
 2-14-15-99 - TIH with 4 stands. Sting into retainer. Pressured up on annulus to 750 psi. Established injection rate of 4 BPM at 250 psi. Pumped 150 sacks "H" Neat (18# cement). Well taking cement on vacuum. Waited 20 minutes, then moved cement 2 bbls. Perforations 7636-7747' (Canyon) squeezed to 3500 psi with 7 bbls cement in tubing. Sting out of retainer. Tried to reverse cement. Could not reverse out. Tried pumping down tubing to get cement to move. Could not circulate cement out. TOOH with tubing. Laid down 52 joints

14. I hereby certify that the foregoing is true and correct. CONTINUED ON NEXT PAGE:

Signed Rusty Klein Title Operations Technician Date Feb. 25, 1999

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: