

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on re-
verse side)

BLM Roswell District
Modified Form No.
NMD60-3160-4

95F

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		3a. Area Code & Phone No. 505/748-1471		5. LEASE DESIGNATION AND SERIAL NO. NM 26864	
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 1980' FNL & 660' FEL, Sec. 35-19S-24E				8. FARM OR LEASE NAME Roden GD Federal	
				9. WELL NO. 6	
				10. FIELD AND POOL, OR WILDCAT North Dagger Draw Upper Penn	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit H, Sec. 35-T19S-R24E	
14. PERMIT NO. 30-015-26337		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3646' GR		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Production Casing	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

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.)*

TD 8058'. Reached TD 6-28-90. Ran 198 joints 7" casing set at 8058' as follows: 11 jts 26# N-80, 65 jts 26# J-55, 96 jts 23# J-55, 21 jts 23# N-80 and 5 jts 26# J-55. Float shoe set at 8507', float collar set 8016'. DV tool set at 5418'. Cemented 1st stage w/500 gals WMW #1 + 500 gals Surebond, 950 sx Class "H" w/5#/sx Hyseal, 10% salt, .8% CF-14 (yield 1.19, wt 15.6). PD 12:30 PM 6-30-90. Stage 1 went 9 bbls to bump plug. Open DV tool with 900 psi. Circulated thru DV tool 1-1/2 hours. Circulated 200 sx. Stage 2: 1000 sx Pace-setter Lite w/5#/sx Hyseal, .4% CF-14, 1/4#/sx Celloseal (yield 1.98, wt 12.4). Tailed in w/100 sx Class H Neat (yield 1.19, wt 15.6). PD 4:00 PM 6-30-90. Closed DV tool with 3050 psi, held okay. Circulated 200 sacks. WOC 24 hrs.

RECEIVED

JUL 13 '90

ARTESIA, OFFICE

ACCEPTED FOR FILING

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RECEIVED
JUL 9 8 43 AM '90
CARTERSVILLE, GA

RECEIVED

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

SIGNED [Signature] TITLE Production Supvr. DATE 7-3-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side