

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMP
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(Other instructions on re-
verse side)

MM Roswell District
Modified Form No.
NM60-3160-4

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 42787	
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 660' FNL & 660' FEL, Sec. 10-20S-24E		8. FARM OR LEASE NAME Ocotillo ACI Federal	
14. PERMIT NO. 30-015-26338		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3704.1' GR		10. FIELD AND POOL, OR WILDCAT Und. Cemetery Morrow	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit A, Sec. 10-T20S-R24E	
		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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <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.)

5-21-90. Ran 28 joints 10-3/4" 40.5# J-55 ST&C casing st at 1195'. Guide shoe set 1195'. Insert float set 1152'. Cemented w/100 sx thickset H w/1/2# Celloseal, 5# Hyseal + 2% CaCl2 (yield 1.49, wt 14.6). and 750 sx Pacesetter Lite C w/1/2# Celloseal, 8# Hyseal (yield 1.98, wt. 12.4). Tailed in w/200 sx Class C + 2% CaCl2 (yield 1.32, wt 14.8). PD 2:00 PM 5-12-90. Bumped plug to 1000 psi, float held okay. Circulated 65 sx cement. WOC. Drilled out 11:15 AM 5-22-90. WOC 21 hrs and 15 minutes. NU and tested casing to 1000 psi for 30 minutes, OK. Reduced hole to 9-1/2" and resumed drilling.

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

SIGNED [Signature]

TITLE Production Supervisor

DATE 6-4-90

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side