

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.
NMO60-3160-4

4158

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 045274	
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' FSL & 1980' FEL, Sec. 23-20S-24E				8. FARM OR LEASE NAME Hill View AHE Federal Com	
				9. WELL NO. 4	
				10. FIELD AND POOL, OR WILDCAT South Dagger Draw Upper Penn	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit J, Sec. 23-T20S-R24E	
14. PERMIT NO. 30-015-26356		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3642' 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:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANE	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Production Casing, Perforate	<input checked="" type="checkbox"/>		

(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.) *

TD 8120'. Reached TD 6-24-90. Ran 199 joints of 7" casing set at 8120' as follows: 15 jts 26# N-80; 64 jts 26# J-55, 94 jts 23# J-55; 23 jts 23# N-80 and 3 jts 26# J-55. Float shoe set 8120', float collar set 8077'. DV tool set 5592'. Marker jts set 7517' and 7508'. Cemented 1st stage: 1000 gals Super Flush 101, followed by 650 sx Class H w/.4% Halad 22A, .3% CFR-3, 5#/sx Gilsonite, 5#/sx salt (yield 1.2, wt 15.6). PD 11:15 AM 6-26-90. Open DV tool with 750 psi. Circulated thru DV tool for 1 1/4 hrs. Circulated 85 sx to pit. Stage 2: 800 sx Halliburton Lite, 5#/sx Gilsonite, 1/2#/sx Floseal (yield 1.84, wt 12.4). Tail in w/100 sx Class H Neat (yield 1.2, wt 15.6). PD 2:00 PM 6-26-90. Closed DV tool with 3600 psi, held okay. Circulated 200 sx to pit. Bumped plug to 2400 psi for 2 minutes. Float and casing held okay. WOC. WOCU 4 days.

7-2-90. Drilled DV tool at 5592'. Perforated 7751-63' w/7 .50" holes as follows: 7751, 53, 55, 57, 59, 61 and 7763'. Acidized perms w/900 g. 20% NEFE acid.

7-10-90. Perforated 7635-7709' w/11 .50" holes as follows: 7635, 37, 39, 69, 70, 71, 97, 99, 7705, 07, and 7709'. Acidized perms 7635-7709' w/1700 gals 20% NEFE in 3 stages. Acidized 7751-7763' w/2000 gals 20% NEFE acid.

JUL 27 '90

O. C. D.
ARTESIA, OFFICE

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

SIGNED [Signature]

TITLE Production Supervisor

DATE 7-19-90

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side