

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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BLM Roswell District
Modified Form No.
NM060-3160-4

215F

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"/> | | 5. LEASE DESIGNATION AND SERIAL NO. NM 39121 | |
| 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 560' FSL & 560' FEL, sec. 9-20S-24E | | 8. FARM OR LEASE NAME Judith AIJ Federal | |
| 14. PERMIT NO. 30-015-26632 | | 9. WELL NO. 1 | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3749' GR | | 10. FIELD AND POOL, OR WILDCAT South Dagger Draw Upper Penn | |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit P, Sec. 9-T20S-R24E | | 12. COUNTY OR PARISH Eddy | |
| 13. STATE NM | | | |

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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"/> |
| 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 PLANS | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | |

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

Spudded 26" hole with rathole 3:30 PM 1-30-91. Set 40' of 20" conductor. Notified Jim Amos, BLM, Carlsbad, NM, of spud. Resumed drilling 14-3/4" hole 4:30 PM 1-31-91. Notified BLM answering service 5:00 PM 1-31-91. Ran 28 joints 8-5/8" 36# J-55 ST&C casing set 1216'. Guide shoe at 1216', insert float set 1171'. Cemented w/900 sx Howco Lite + 1/4#/sx Flocele + 5#/sx Gilsonite + 3% CaCl2 (yield 2.03, wt 12.4). Tailed in w/200 sx "C" + 2% CaCl2 (yield 1.32, wt 14.8). PD 12:45 PM 2-5-91. Bumped plug to 1000 psi, released pressure and float held okay. Circulated 125 sacks. WOC. Drilled out 6:45 AM 2-6-91. WOC 18 hrs. NU and tested to 1000 psi for 30 minutes, OK. Reduced hole to 8-3/4". Resumed drilling.

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

SIGNED [Signature]

TITLE Production Supervisor

DATE 2-11-91

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

SJS