

UNITED STATES **N.M. Oil Cons. Division**
DEPARTMENT OF THE INTERIOR **S. 1st**
BUREAU OF LAND MANAGEMENT **8210-2834**

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

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

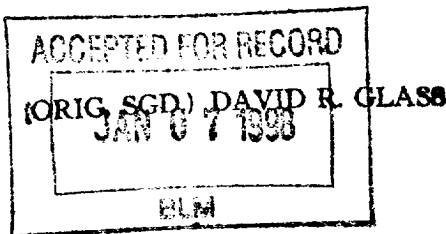
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. Preston Federal #13
2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471	9. API Well No. 30-015-29061
3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210	10. Field and Pool, or Exploratory Area Dagger Draw Upper Penn, Sc
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 660' FEL of Section 35-T20S-R24E (Unit I, NESE)	11. County or Parish, State Eddy Co., NM

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 <u>Date of 1st Production</u>
	<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

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.)*

Date of 1st Production: December 21, 1997



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

Signed

Rusty Kline

Title

Operations Technician

Date

Dec. 30, 1997

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

RECEIVED

MAR 26 37

RECEIVED
MAR 26 37