

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

13.1 Street
Artesia, NM

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

5. Lease Designation and Serial No.
NM-045276

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Preston Federal #4

9. API Well No.
30-015-10581

10. Field and Pool, or Exploratory Area
Dagger Draw Upper Penn,

11. County or Parish, State
South
Eddy Co., NM

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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
YATES PETROLEUM CORPORATION (505) 748-1471

3. Address and Telephone No.
105 South 4th St., Artesia, NM 88210

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
990' FSL & 990' FEL of Section 34-T201S-R23E (Unit P, SESE)

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

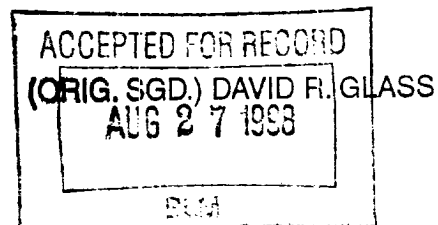
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Water Shut Off	<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.)*

8-20-98 - Moved in and rigged up pulling unit. Loaded tubing with 2% KCL water. Nippled down wellhead and installed BOP. TOOH with tubing and sub pump. TIH with packer and tubing. Set packer at 7419'. Flow tested. Shut well in.

8-21-98 - Loaded tubing with 2% KCL water. Unset packer and TOOH. Rigged up wireline. TIH with cement retainer and set retainer at 7694'. TOOH and rigged down wireline. TIH with packer and tubing. Set packer at 7419'. Flow tested. Shut well in.

8-22-98 - Flow tested. Loaded tubing with 2% KCL water. Unset packer. Removed BOP and nipped up wellhead. Reset packer at 7419'. Flow tested. Shut well in. Released well to production department.



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

Signed Lusty T. Glass Title Operations Technician Date August 25, 1998

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____