

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions
verse side)

Modified Form No.
NMD60-3160-4

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"/> RECOMPLETION		5. LEASE DESIGNATION AND SERIAL NO. NM 3606	
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' FNL & 1980' FWL, Sec. 11-21S-26E		8. FARM OR LEASE NAME Lake Shore XH Federal	
14. PERMIT NO. 30-015-24478		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3184' GR		10. OLD NAME POOL OR WILDCAT <i>Palabera Draw H2O</i>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit F, Sec. 11-T21S-R26E	
		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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)

1-29-91. Rigged up.

1-30-91. Set CIBP 10925' w/35' cement on top. TIH w/packer and RBP. Set RBP 10750'; packer at 10600'. Swabbed tubing down. Perforated thru tubing 10690-10717' w/27 - .38" holes (1 SPF). Acidized perforations 10690-10717' w/500 g. 15% NEFE acid. Swabbed well dry. Small show of gas.

2-7-91. Released packer and RBP. Set RBP 10600', tested RBP to 3000#. Set packer 10400' and tested to 500#. Swabbed tubing down to 7000'. Perforated 10484-491' and 10498-502' w/24 .38" holes

2-8-91. Acidized perforations 10484-10502' w/2000 gals 15% NEFE acid + ball sealers.

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

SIGNED

TITLE Production Supervisor

DATE 2-8-91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

5

SJS

*See Instructions on Reverse Side