

UNIT 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.
NMD60-3160-4

45F

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"/>		3a. Area Code & Phone No. 505/748-1472		5. LEASE DESIGNATION AND SERIAL NO. NM 81929
2. NAME OF OPERATOR YATES PETROLEUM CORPORATION		3b. AREA OFFICE		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 2250' FNL & 1160' FWL				8. FARM OR LEASE NAME Gazelle AHG Federal Com
				9. WELL NO. 1
				10. FIELD AND POOL, OR WILDCAT Wildcat Strawn
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit E, Sec. 15-T20S-R29E
14. PERMIT NO. 20-015-26354		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3296' GR		12. COUNTY OR PARISH Eddy
				13. STATE NM

Proposed producing zone: 1815' FSL & 2145' FEL

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 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) Set surface & 13-3/8" csg <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.)

Spudded 36" hole 4:00 PM 4-30-90. Set 40' of 20" conductor. Notified Dale Carpenter, BLM, Carlsbad, NM, of spud. Resumed drilling 26" hole with rotary 2:00 PM 5-3-90. Ran 11 jts 20" 106.5# K-55 ST&C set 446'. Guide shoe set 445', baffle plate set 406'. Cemented w/475 sx Pacesetter Lite w/2% CaCl (yield 1.99, wt 12.40. Tail in w/450 sx Class C w/2% CaCl (yield 1.33, wt 14.8). Used baffle plate. SI w/400 psi. PD 6:55 AM 5-4-90. Circulated 85 sx. WOC. Drilled out 7:00 PM 5-4-90. WOC 11 hrs and 5 mins. Tested to 1000 psi for 30 mins. Reduced hole to 17-1/2". Resumed drilling. Ran 32 jts 13-3/8" 54.5# K-55 ST&C casing set at 1351'. Guide shoe set 1350', float collar set 1310'. Cemented w/750 sx Pacesetter Lite w/10% salt (yield 1.99, wt 12.6). Tail in w/300 sx Class C w/2% CaCl (yield 1.33, wt 14.8). PD 5:50 PM 5-5-90. Bumped plug to 1000 psi, held OK. Circulated 93 sx. Tested to 1000 psi for 30 mins. WOC. Drilled out 2:00 PM 6-5-90. WOC 20 hrs. Cut off and weld on flow nipple. Reduced hole to 12-1/4". Resumed drilling.

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

SIGNED [Signature]

TITLE Production Supervisor

DATE 5-7-90

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side