Form 3160-5 (June 1990)

UNITED STATES

FORM APPROVED

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 Well X Well Cther 2. Name of Operator YATES PETROLEUM CORPORATION 3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 5. Lease Designation and Serial No. LC 070207-A 6. If Indian, Allottee or Tribe Name 7. If Unit or CA, Agreement Designation 8. Well Name and No. Foundation ALO Fed Com # 9. API Well No. 30-015-27079 10. Field and Pool, or Exploratory Area Wildcat Morrow.	(Julie 1770)	DEPARTMENT OF		Expires: March 31, 1993
SUBMIT IN TRIPLICATE 1. Type of Well New New Construction		BUREAU OF LAND	MANAGEMENT (1)	
SUBMIT IN TRIPLICATE 1. Type of Well	C	UNDBY NOTICES AND	DEDOCTO COLUMNIA SECURIO	LC 070207-A
SUBMIT IN TRIPLICATE 1. Type of Well New New Construction	Do not use this for-	UNDRY NOTICES AND	REPORTS ON WELLS	6 If Indian Alleman w T. 3. At
SUBMIT IN TRIPLICATE 1. Type of Well New New Construction	Do not use this form	for proposals to drill or	to deepen or reentry to a different reserve	oir.
Type of Well Well Gaber S. Well Name and No.	Use	"APPLICATION FOR PER	RMIT—" for such proposals	
Type of Well Well Coper S. Well Name and No.		CUDAITIAL	TOUR LOATE	7. If Unit or CA, Agreement Designation
Name of Operators S. Well Name and No.		SOBMITINI	RIPLICATE	
2 Name of Operator YATES PETROLEUM CORPORATION 3 Address and Techpione No. 105 South 4 th St., Artesia, NM 88210 4 Loaison of Well (Fronce, T. R. M., or Surrey Description) Unit J, 1980' FSL & 1980' FEL, Sec. 11-T2OS-R3OE 12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Issues Advandament Notice Advandament Notice Recompletion New Construction New Construction New Construction New Recompletion New Recom				
VATES PETROLEUM CORPORATION (505) 748-1471) 7. Aultress and Telephone No. 7. Aultress and Telephone No. 8. Autress and Telephone No. 105 South 4th St., Artesia, NM 88210 6. Location of Well (Footage, Sec., T., R., M., or Surrey Description) 10. Field and Peor, or Experiency Area Wildcat Morrow 11. Courn of Patish, Same Eddy, NM 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Recompletion Notice of Intent Recompletion Recompletion New Construction Recompletion New Construction New Construction Recompletion New Construction Dispose Water 13. Describe Proposed or Completed Operations (Clearly, tase all perfinent details), and give perintent dates, including estimated date of starting any proposed work. If well in directionally		8. Well Name and No.		
3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210 10. Field and Pool, or Exploratory Area 11. Location of World Trongue, Sec. 1. R. N., or Survey Description 11. County or Parink, State Eddy, NM 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 13. TYPE OF SUBMISSION 14. Abandonment 15. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated dure of starting and monitories work after the cations and measured and true verifical depths for all arrives and consequent work. Twell discreminally of miled. 15. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent to thus work.) 16. Describe Proposed or Completed Operations 22115—12120' (via 2-7/8" tubing) w/34000g. Binary Foam w/200000\$\frac{2}{3}\$ 20/40 sand. Flowed well to clean up. Well flowed 650 psi on 24/64" choke = 2250 mcfgpd. 16. Ibertal between the control of the proposed or Temple of the period of the proposed or Temple of				Foundation AIO Fed Com #
10.5 South 4th St., Artesia, NM 88210 10. Field and Pool, or Spidoratory Area 10. Location of Well (Foodgas, Sec., T. R. M. or Survey Description) Unit J, 1980' FSL & 1980' FFL, Sec. 11-T2OS-R3OE 11. Course or Parish, State Eddy, NM 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent		M CORPORATION	(505) 748-1471)	9. API Well No.
D. Field and Pool, or Exploratory Area Location of Well fronces, Sec. 1, S. M. or Survey Description	•			30-015-27079
Unit J, 1980' FSL & 1980' FFL, Sec. 11-T20S-R30E Check Appropriate Box(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION	105 South 4th	St., Artesia, NM 8	8210	
Unit J, 1980' FSL & 1980' FSL, Sec. 11-T20S-R30E II. Country or Parish, State Eddy, NM I2. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Nonce of Intent Abandonment Recompletion New Construction Non-Routine Fracturing Waster Shart Off Conversion to hipschoon Other Repair trained multiple completion of Recompletion Repair and Log Rem Only				Wildcat Morrow
Eddy, NM CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION	Unit J, 1980' FSL	& 1980' FEL, Sec.	11-T20S-R30E	
Type of Submission Non-Rodine Fracting Non-Rodine Fracturing Water Shu-Coff Conversion to Injection Non-Rodine Fracturing Water Shu-Coff Conversion to Injection The Submission of Submission of Submission Submission The Submission of Submission Submission The Submission Submission Submission Type of Attering Casing Recompletion Report Plugging Back Non-Rodine Fracturing Water Shu-Coff Conversion to Injection Non-Rodine Fracturing Water Shu-Coff Conversion to I				
TYPE OF SUBMISSION Notice of linent	_			Eddy, NM
TYPE OF SUBMISSION Notice of Intent	12. CHECK AP	PROPRIATE ROYAL TO	INDICATE NATURE OF NOTICE RE	DODT OR OTHER DATE
Notice of Intent			TINDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
Recompletion Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Other Frac Well Dispose Water Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Other Frac Well Dispose Water Non-Recompletion on Well Non-Report evaluation of the 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.)* 12-14-92	TYPE OF SUE	BMISSION	ON	
Recompletion Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Other Frac Well Dispose Water Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Other Frac Well Dispose Water Non-Recompletion on Well Non-Recompletion Non-Recompletion on Well Non-Recompletion on Non-Recompletion Non-Recompletion on Well Non-Recompletion on Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion on Non-Recompletion Non-Recompletion on Non-Recompletion Non-Recompleti	Notice of Inte	eni	Abandanmar	
Plugging Back Non-Routine Fracturing Plugging Back Casing Repair Water Shut-Off Altering Casing Conversion to Injection Dispose Water Note Report evalue of multiple completion on New Hort Note Report evalue of multiple completion on New Hort Note Report evalue of multiple completion on New Hort Note Report evalue of multiple completion on Report and Log form give subsurface locations and measured and true vertical depths for all markers and zones pertinent dates including estimated date of starting any proposed work. If well is directionally drilled, 12-14-92. Frac'd perforations 12115-12120' (via 2-7/8" tubing) w/34000g. Binary Foam w/20000# 20/40 sand. Flowed well to clean up. Well flowed 650 psi on 24/64" choke = 2250 mcfgpd. 14.				
Casing Repair Water Shut-Off Casing Repair Casing Repair Casing Repair Casing Repair Casing Repair Casing Repair Conversion to Injection Conversion to Inj	X Subsequent R	enort	<u> </u>	
Altering Casing Conversion to Injection Dispose Water Frac Well Completion on Recompletion on Well Conversion to Injection Dispose Water Conversion to Injection Conversion Conversion to Injection Conversion	bassaquent n	i i i i i i i i i i i i i i i i i i i		
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give periment 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.)* 12-14-92. Frac'd perforations 12115-12120' (via 2-7/8" tubing) w/34000g. Binary Foam w/20000# 20/40 sand. Flowed well to clean up. Well flowed 650 psi on 24/64" choke = 2250 mcfgpd. 14. I hereby certify that the foregoing is true, and correct Signed Land Operations of Supervisor Tatle Production Supervisor Date 12-15-92 Approved by Approved by Approved, if any:	Final Ahando	nnment Notice		
Concession Control Completed Compl	I mai Abando	Millelk Hotice		
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.)* 12-14-92. Frac'd perforations 12115-12120' (via 2-7/8" tubing) w/34000g. Binary Foam w/20000# 20/40 sand. Flowed well to clean up. Well flowed 650 psi on 24/64" choke = 2250 mcfgpd. 14. Thereby certify that the foregoing is true, and correct Signature and a contract of the production Supervisor pate 12-15-92 This proceed for Fortyal or State of Recycle. Title Date Date Conditions of approval, if any:			ta other ride well	
12-14-92. Frac'd perforations 12115-12120' (via 2-7/8" tubing) w/34000g. Binary Foam w/20000# 20/40 sand. Flowed well to clean up. Well flowed 650 psi on 24/64" choke = 2250 mcfgpd. 14. I hereby certify that the foregoing is true, and correct Signed and a standard of the conditions of approval, if any. Title Production Supervisor Date Date Conditions of approval, if any.	12 David David C			Completion or Recompletion Penart and Log form
Signed Canada Docalia Title Production Supervisor Date 12-15-92 (This space for Federal or State office use) Approved by Conditions of approval, if any: Date	w/20000# 20/40	sand. Flowed well	to clean up. Well flowed 650	v/34000g. Binary Foam psi on 24/64" choke =
Signed Canada Docalia Title Production Supervisor Date 12-15-92 (This space for Federal or State office use) Approved by Conditions of approval, if any: Date				1993 ALEMAN
Conditions of approval, if any:	Signed	ta Doodsess	τιμε Production Supervisor	Date
	Approved by	on than	Title	Date
	Conditions of approval, if any			