

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

AUG 02 1991

O. C. D.
ARTESIA, OFFICE

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

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

YATES PETROLEUM CORPORATION

3. Address and Telephone No.

105 South 4th St., Artesia, NM 88210 (505) 748-1471

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit J, 1980' FSL & 2130' FEL, Sec. 3-T24S-R24E

5. Lease Designation and Serial No.

NM 664

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Lechuguilla Canyon DK Fed

9. API Well No.

#1

30-015-24049

10. Field and Pool, or Exploratory Area

Crooked Creek Morrow

11. County or Parish, State

Eddy, NM

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

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Remedial Work

☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on 'Well Completion or Recompletion Report and Log form'.)

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.)*

5-16-91. RU Cudd Pressure Control. GIH with pumpout plug, No-Go and 10007' of 1 1/2" OD coiled tubing. Hung on slips, pumped out plug and displaced with 75000 SCF N2. SI to fabricate wellhead. On line at 6:30 PM. Flow cased 30 minutes. Attempted to unload thru coiled tubing.

Return well to production.

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

Signed [Signature]

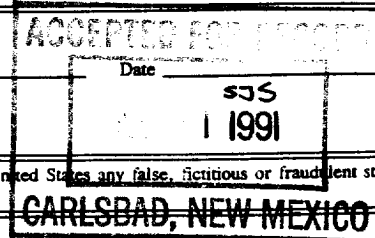
Title Production Supervisor

Date 7-26-91

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____



Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side