

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS

(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 ☐ GAS WELL ☒ OTHER ☐ MAY - 8 1991

2. NAME OF OPERATOR Yates Energy Corporation ✓ O. C. D.

3. ADDRESS OF OPERATOR P. O. Box 2323, Roswell, NM 88202-2323 ARTESIA, OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface 1740' FSL - 660' FEL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
4210' GR

5. LEASE DESIGNATION AND SERIAL NO. NM-37843

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Desert Rose Federal

9. WELL NO. 1

10. FIELD AND POOL, OR WILDCAT Und. East Hess Morrow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T23S, R23E

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: |                          | SUBSEQUENT REPORT OF:                  |                                     |
|-------------------------|--------------------------|--|-------------------------------------|
| TEST WATER SHUT-OFF     | <input type="checkbox"/> | WATER SHUT-OFF                         | <input type="checkbox"/>            |
| FRACTURE TREAT          | <input type="checkbox"/> | FRACTURE TREATMENT                     | <input type="checkbox"/>            |
| SHOOT OR ACIDIZE        | <input type="checkbox"/> | SHOOTING OR ACIDIZING                  | <input type="checkbox"/>            |
| REPAIR WELL             | <input type="checkbox"/> | (Other) Spudding, drilling & cementing | <input checked="" type="checkbox"/> |
| (Other)                 | <input type="checkbox"/> | (Other)                                | <input 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.) \*

9/4/89: Spudded a 17½" hole at 12:00 p.m. 9/3/89, ran 11 joints 13 3/8" 54.50#/ft., K-55, ST&C casing 354', set at 350', cemented with 425 sacks premium plus with ½# Flocele/sk., 2% CACL2, followed in with 100 sacks premium thick set with 10# Gilsonite/sk., and ½# Flocele/sk., 2% CACL2, did not circulate to surface, plug down at 4:30 a.m. 9/4/89, top of cement at 36', will use ready mix to surface.

9/5/89: Present operation drilling cement. WOC 21 hours.

9/6/89: Resumed drilling a 12½" hole. Drilling at 1430'.

RECEIVED  
SEP 7 10 33 AM '89  
CARLETON DISTRICT OFFICE  
AREA HEADQUARTERS

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

SIGNED Cindy Stevens TITLE Production Clerk DATE 9/6/89  
Cindy Stevens

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

SJS