

UNITED STATES OF AMERICA  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NM 88210

Expires August 31, 1985

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 | 2. NAME OF OPERATOR<br>Yates Energy Corporation            | 3. ADDRESS OF OPERATOR<br>P. O. Box 2323, Roswell, NM 88202-2323 | 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>1740' FSL - 660' FEL | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM-37843 | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | 7. UNIT AGREEMENT NAME | 8. FARM OR LEASE NAME<br>Desert Rose Federal | 9. WELL NO.<br>1 | 10. FIELD AND POOL, OR WILDCAT<br>Und. East Hess Morrow | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 27, T23S, R23E | 12. COUNTY OR PARISH<br>Eddy | 13. STATE<br>NM |
| 14. PERMIT NO.                                                                          | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>4210' GR |                                                                  |                                                                                                                                                                |                                                 |                                      |                        |                                              |                  |                                                         |                                                                         |                              |                 |

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 COMPLETION  | <input type="checkbox"/> |
| SHOOT OR ACIDIZE    | <input type="checkbox"/> | ABANDON*             | <input type="checkbox"/> |
| REPAIR WELL         | <input type="checkbox"/> | CHANGE PLANS         | <input type="checkbox"/> |
| (Other)             | <input type="checkbox"/> |                      | <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

|                       |                          |                 |                                     |
|-----------------------|--------------------------|-----------------|-------------------------------------|
| WATER SHUT-OFF        | <input 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 checked="" type="checkbox"/> |
| (Other)               | <input type="checkbox"/> |                 | <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.)\*

10-20-89: Rig up and frac the Morrow from 9880'-9900' with 22,300 gallons Versagel 1500, (18,300 gallons gel and 4,000 St. cu. feet of nitrogen), 1800# 20/40 interprop. Recovered load.

RECEIVED

NOV 6 8 56 AM '89

Adm

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

SIGNED

*Cindy Stevens*  
Cindy Stevens

TITLE

Production Clerk

DATE

11/3/89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side