			. clst
Form 3160-5 (June 1990) Do not use this	DEPARTMENT ( BUREAU OF LAI SUNDRY NOTICES AN	RECEIVED D STATES OF THE INTERIOR ND MANAGEMENT O. C. D. ND REPORTS ON WELLSARTESAL OFFICE or to deepen or reentry to a different reservoi PERMIT—" for such proposals	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. NM 65418 o. If Indian, Allottee or Tribe Name r.
	SUBMIT IN	I TRIPLICATE	7. If Unit or CA, Agreement Designation
2. Name of Operator YATES PETRO 3. Address and Telepho 105 South 4 4. Location of Well (Fo Unit A, 66	ell Other WORLOV LEUM CCRPORATION ne No. th St., Artesia, NM mage. Sec. T. R. M. or Survey Discr 50' FNL & 430' FEL, Se	88210 (505) 748-1471	8. Weil Name and No. Dolores AIL Federal #1 9. API Weil No. 30-015-26547 10. Field and Pool. or Exploratory Area Livingston Ridge Delaware 11. County or Parish. State Eddy, NM ORT, OR OTHER DATA
	OF SUBMISSION	TYPE OF ACTIO	
	ice of Intent sequent Report	Abandonment Recompletion Plugging Back	Change of Plans Change of Plans New Construction Non-Routine Fracturing Water Shut-Off
Fina	u Abandonment Notice	L Cusing Repair Altering Cusing XX Other Add perforations &	Water Shut-Off Conversion to Injection Dispose Water Note: Report results of multiple completion on Weil

Completion or Recompletion Report and Log form.) 13. Describe Proposed or Completed Operations (Clearly state of pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally initial give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Well completed in perforations 7012-7042' (Cherry Canyon). Propose to add Brushy Canyon perforations 8235-8298' and 7953-8005'. NOTE: Cherry Canyon and Brushy Canyon are in the Delaware formation. Will acidize perfs 8235-8298' w/1500 g.  $7\frac{1}{2}$ % NEFE acid and frac w/10000g. 40# XL + 30000# 20/40 sand. Will acidize perfs 7953-8005' w/1500 g. 71% acid and frac w/10000g. 40# XL + 30000# 20/40 sand.

treat.

TOOH with RBP and packer and put well on pump.

n is junadiction

or representations as to any matter with

14. I hereby certify that the foregoing is true and correct Signed Cantta Andle	Tide Production Supervisor	Decc7-15-91
(This space for Federal or State office use/ Approved by Conditions of approval, if any:	Tide	Date <u>7/16/91</u>
Tota 19 11 S.C. Samoa 1001, makes it a crime for any person	knowingly and willfully to make to any department or agency of the United	ed States any faise, fightious or fraudulent statement