orm 3160-5	UNITED STA		FORM APPROVED Budget Bureau No. 1004-0135
June 1990)	DEPARTMENT OF TH		Expires: March 31, 1993 5. Lease Designation and Serial No.
	BUREAU OF LAND MA	ANAGEMENT	NM 65418
SI	UNDRY NOTICES AND RE	PORTS ON WELLS	6. If Indian, Allottee or Tribe Name
Do not use this form	for proposals to drill or to d	eepen or reentry to a different reservoir.	
Use	"APPLICATION FOR PERMIT	—" for such proposals	
SUBMIT IN TRIPLICATE			7. If Unit or CA, Agreement Designation
1. Type of Well   Image: Second seco			8. Well Name and No.
2. Name of Operator YATES PETROLEUM CORPORATION /			Dolores AIL Federal #1 9. API Well No.
3 Address and Telephone No.			30-015-26547
105 South 4th St., Artesia, NM 88210 (505) 748-1471			10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Livingston Ridge Delawar
Unit A, 660' FNL, 430' FEL, S@c. 14-T22S-R31E			11. County or Parish, State
Unit A, 660' FN	L, 400 ГЕЦ, Sec. 14-1		
			Eddy, NM
CHECK AP	PROPRIATE BOX(s) TO IN	DICATE NATURE OF NOTICE, REPO	
TYPE OF SU	TYPE OF SUBMISSION TYPE OF ACTION		
Notice of Int	tent	Abandonment	Change of Plans
		Recompletion	New Construction
X Subsequent F	Report	Plugging Back	Water Shut-Off
			Conversion to Injection
Final Abando	onment Notice	Altering Casing       X     Other     Perforate, treat	Dispose Water
		existing zone.	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
13. Describe Proposed or Comple	eted Operations (Clearly state all pertinent de and measured and true vertical depths for	tails, and give pertinent dates, including estimated date of starti- all markers and zones pertinent to this work.)*	ng any proposed work. If well is directionally drilled,
Well completed	in Delaware perforation	ons 7012-7042'.	_
10-22-91. Perf	orated and treated ad	ditional Delaware zones as fol	lows:
perfs 7117-22' 20% NEFE acid.	es-2 SPF), 7070-73' (w/500 g. $7\frac{1}{2}$ % NEFE acid	8 holes-2 SPF), 6615-26' (10 ho d, 7070-73' w/500 g. 7½% NEFE on.	oles-2 SPF). Acidized acid, 6615-26' w/1000g.
14 Thereby certify that the for	egoing is true and correct		
14 I hereby certify that the for	egoing is true and correct	Tide Production Supervisor	<u>. 11-7-31</u>
14 Thereby certify that the for Signet (Land	egoing is true and correct	Tide Production Supervisor	Date