Sigr Th	ris space for Federal or State office/use) proved by nditions of approval, if any:	Title	Date 3
Sigr			Date
Sigr			
4. [he	1 in the And	Title Production Supervisc	□r Date <u>11−ó−31</u>
	reby certify that the foregoing is true and correct		- 11 4 31
head not	d. Pressure test packer i witness). RD unit. NU i	injection line and return to wat	er disposal.
	11221 Dump 130 bble pact	ker fluid down annulus (cap 42 bl 500# for 30 minutes. (Notified)	bls). Set packer. Flange tubin NMOCD. Artesia, to witness — did
n . 1 .	TOH TTH W	ith 5 [‡] " nickel plated Uni VI pac	ker, 3 ¹ / ₂ " plastic-coated tubing
4866	6-4975′ w/2000 gals 7½% NH 00# 30# XL gel with 45000≉	EFE acid. Frac'd perfs 4866-497: # 20/40 sand.	5° W/3000 gais 30# iinear ger,
1 7 7	1 01 Derforated $\sqrt{9}/\sqrt{-75}$	' (32 holes-1 SPF) and 4866-4907	' (42 holes-1 SPF). Acidized per
2000	20 = 12 = 20% VI col with 4°	5000# 20/40 sand.	
10 2	$p_1 p_2 = p_2 + p_3 = 8$)' (23 holes-1 SPF), 5108-20' (13 SFE acid. Frac'd perfs 5108-5180	o noles-1 Srr). Acidized peris O' w/3000 gals 30# linear pad.
1	a = -28000 $a = 1 = 30 # XI$	gel with 67500# 20/40 sand.	
(10	holes-1 SPF). Acidized 5	5328-5484' w/2000 gals 7½% NEFE a	acid. Frac'd w/4000 gals 30#
ş	give subsurface locations and measured and the ver	rtical depths for all markers and zones pertinent to this work.)* 4' (25 holes-1 SPF), 5401-21' (22	
Descr	ribe 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,
		existing zone.	(Note: Report results of multiple completion of wear Completion or Recompletion Report and Log form.)
	Final Abandonment Notice	Altering Casing	ns, treat Dispose Water
		Casing Repair	Water Shut-Off
	X Subsequent Report	Plugging Back	Non-Routine Fracturing
	Notice of Intent	Abandonment Recompletion	Change of Plans
	TYPE OF SUBMISSION		
		HECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
Unit	H, 1980' FNL, 660' FEL,	Sec. 35-T22S-R31E, NMPM	Eddv, NM
			11. County or Parish, State
105 South 4th St., Artesia, NM88210(505) /48-14/14. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Undes. Delaware
Addres	ss and Telephone No.	M 88210 (505) 748-1471	30-015-26629 10. Field and Pool, or Exploratory Area
Name of Operator YATES PETROLEUM CORPORATION			9. API Well No.
Oil Gas Well Other SWD WELL			David Ross AIT Fed. #1
Type of	f Well		8. Weil Name and No.
	SUBMI	T IN TRIPLICATE	7. If One of CA, Agreenion Congulation
	Use "APPLICATION FC	DR PERMIT—" for such proposals	7. If Unit or CA, Agreement Designation
<u>`o no</u>	tuse the form for proposals to d	rill or to deepen or reentry to a different re	
		AND REPORTS ON WELLS	NM 65419 6. If Indian. Allottee or Tribe Name
	BUREAU OF	LAND MANAGEMENT	5. Lease Designation and Serial No.
			Expires: March 31, 1993
n 3160 e 1990		TED STATES	Budget Bureau No. 1004-0135

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