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Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

O. C. D.
ARTESIA, OFFICE

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
YATES PETROLEUM CORPORATION

3. Address and Telephone No.
105 South 4th St., Artesia, NM 88210 (505) 748-1471

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit 0, 660' FSL & 1650' FEL, Sec. 11-T22S-R31E, NMPM

5. Lease Designation and Serial No.
NM 65417

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
Martha AIK Federal #3

9. API Well No.
30-015-26723

10. Field and Pool, or Exploratory Area
Livingston Ridge Delaware

11. County or Parish, State
Eddy, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Set production casing
	Perforate, Treat
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)

TD 8411'. Reached TD 5-26-91. Ran 196 joints 5-1/2" 15.5 and 17# J-55 casing set at 8411'. Float shoe set 8411', float collar set 8376'. DV tools set at 7400' and 4028'. Cemented in 3 stages. Stage 1: 175 sx "H" + 5#/sx CSE + 0.7% CF-14 + 10#/sx Gilsonite (yield 1.45, wt 14.5). PD 1:59 AM 5-28-91 with 800 psi. Circulate thru DV tool for 4 hrs. Circulate 35 sacks cement. Stage 2: 385 sx Super "H" + 3% salt (yield 2.3, wt 11.5) followed by 150 sx "H" + 5#/sx CSE + 0.7% CF-14 + 10#/sx Gilsonite (yield 1.46, wt 14.5). PD 8:24 AM 5-28-91 with 2500 psi. Cement did not circulate. Stage 3: 400 sx Pacesetter Lite "C" (yield 1.99, wt 12.4), followed by 100 sx "C" (yield 1.32, wt 14.8). PD 1:05 PM 5-28-91 with 3000 psi. Cement did not circulate. Lost circulation 23 bbls before PD. Top of cement by Temperature Survey 580'. WOC. WOCU 24+ hours.

6-1-91. Drilled out DV tool at 4028' and 7400'. Perforated 7004-7028' w/28 - .42" holes (2 SPF) as follows: 7004, 06, 08, 10, 12, 14, 16, 18, 20, 22, 23, 25, 26, and 7028'. Acidized perfs 7004-28' w/2000 g. 7 1/2% NEFE acid. Frac'd perfs 7004-28' w/7500g. 40# XL plus 22500# 20/40 sand. Perforated 6937-6954' w/20 - .42" holes (2 SPF) as follows: 6937, 38, 39, 42, 44, 46, 48, 50, 52, and 6954'. Acidized perfs 6937-54' w/1250 g. 7 1/2% NEFE acid. Frac'd perfs 6937-54' w/7500 g. 40# XL plus 22500# 20/40 sand.

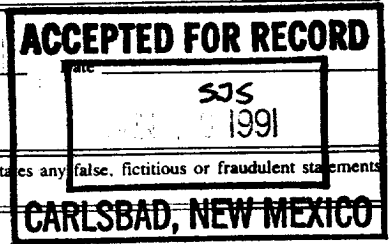
14. I hereby certify that the foregoing is true and correct

Signed [Signature] Title Production Supervisor Date 6-5-91

(This space for Federal or State office use)

Approved by _____ Title _____

Conditions of approval, if any:



Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side