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n 3160-5		D STATES	18 1st		FORM APPROVED Budget Bureau No. 1004-0135		
e 1990)		OF THE INTERIOR		216-263	Expires: March 31, 1993		
	BUREAU OF LA	ND MANAGEMENT	13	5.	Lesse Designation and Serial No.		
	SUNDRY NOTICES A	ND REPORTS ON W	ELLS		NM-90847 If Indian, Allottee or Tribe Name		
o not use this fo	rm for proposals to drill se "APPLICATION FOR I	or to deepen or reentry	to a different re		·		
SUBMIT IN TRIPLICATE					7. If Unit or CA, Agreement Designation		
					8. Well Name and No.		
Oil X Gas Well X Well Name of Operator	Other				ig Freddy Federal	Unit	
YATES PETROL	EUM CORPORATION	(505)	748-1471)		API Well No.		
Address and Telephone N	h St., Artesia, NM	88210		10	30-015-29734 Field and Pool, or Exploratory Ar		
Location of Well (Footage	e, Sec., T., R., M., or Survey Desc	ription)			Haupache Morrow		
	1980' FEL of Section		Jnit G, SWNE)	П	. County or Parish, State		
	. ·				Eddy Co., NM		
CHECK	APPROPRIATE BOX(s)	TO INDICATE NATU	IRE OF NOTICE	, REPORT,	OR OTHER DATA	ä.	
TYPE OF	SUBMISSION		TYPE O	FACTION	·	*	
Notice o	f Intent	Abandonn	ent		Change of Plans		
		Recomplet	ion		New Construction		
X Subseque	ent Report	Plugging 1			Non-Routine Fracturing		
Final Abandonment Notice		Casing Re	•		Conversion to Injection		
L_1 Final At	bandonment Notice		erforate & a	cidize	Dispose Water		
					(Note: Report results of multiple completion	n on Well	
Describe Proposed or Co	mpleted Operations (Clearly state all	pertiment details, and give pertinent deaths for all markers and zones	dates, including estimated pertinent to this work.)*	date of starting any	Completion or Recompletion Report and 1	o <b>g (o</b> rm )	
give subsurface loci	ations and measured and true vertical	TIH with 4 <sup>11</sup> c	sing guns an	d perfora	Completion of Recompletion Report and the proposed work. If well is directional to the directional ted 7368-7743 w/2	os form ) Hy drilled	
give subsurface locs 11-26-97 - 1	ations and measured and true vertical Rigged up wireline	. TIH with 4" ca and 7535-7543'	ising guns and 1 SPF - Cisc	d perfora o). TOOH	Completion or Recompletion Report and the proposed work. If well is directional ted 7368-7743 w/2 with casing guns	es form ) ily driffed 26 . 4 and	
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\*See Instruction on Reverse Side