Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

8.19.19. 300 Althau 130 ct FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993
5. Lease Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS		5. Lease Designation and Serial No.
		NM-80645
Do not use this form for proposals to dr	ill or to deepen or reparty to a different reserved. R PERMIT—" for such proposals	6. If Indian, Allottee or Tribe Name
CHDMIT	IN TRIPLICATE MAY 2 1 1997	7. If Unit or CA, Agreement Designation
	IN INIPLICATE MAI & 1991	
1. Type of Well Oil Gas	OIL CON. DIV.	8. Well Name and No.
X Oil Gas Well Other Name of Operator		Lily ALY Federal #6
YATES PETROLEUM CORPORATION	(505) 748 451 5. 2	9. API Well No.
3. Address and Telephone No.		30-015-27276
105 South 4th St., Artesia, NM 88210		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		Ingle Wells Delaware
2310' FSL & 2310' FEL of Section 3-T24S-R31E (Unit J, NWSE)		11. County or Parish, State
		Eddy Co., NM
12. CHECK APPROPRIATE BOX	(s) TO INDICATE NATURE OF NOTICE, REPO	ORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	N .
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing Droducing thru look	Conversion to Injection
	X Other Producing thru lact	Dispose Water (Note: Report results of multiple completion on Well
		Completion or Recompletion Report and Log form.)
 Describe Proposed or Completed Operations (Clearly state a give subsurface locations and measured and true verti 	all pertinent details, and give pertinent dates, including estimated date of start ical depths for all markers and zones pertinent to this work.)*	ing any proposed work. If went is directionally diffied,
Effective May 8 1997 well	began producing thru lact unit locate	ed at the Lilv ALY Federal
Battery (Unit H. SENE of Sec	tion 3-T24S-R31E). Transporter will	be EOTT Energy Corporation
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	C. C.	RECEI 91 NAY 15 PROSWELL
<u></u>	And the second s	
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		CRA D
14. I hereby cerrify that the foregoing is true and correct		3 %
Aut Alan	Title Operations Technician	Date May 12, 1997
(This space for Federal of State office use)		
	Wal.	Date
Approved by	Title	Date