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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-82904
2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471	6. If Indian, Allottee or Tribe Name Not Applicable
3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210	7. If Unit or CA, Agreement Designation Not Applicable
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL & 660' FEL, Unit P, Section 6-T24S-R31E 330	8. Well Name and No. Adeline ALN Federal #16
	9. API Well No. 30-015-27280
	10. Field and Pool, or Exploratory Area South Sand Dunes Delaware
	11. County or Parish, State Eddy, New Mexico

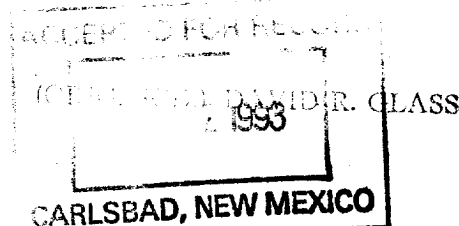
12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" 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 <u>Production Casing</u>
	<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 8160'. Reached TD 8:00 AM 1-14-93. Ran 182 joints 5-1/2" 15.5# and 17# J-55, casing set 8160'. Float shoe set 8160', float collar set 8115'. DV tool set 6703'. Cemented in 2 stages. Stage I: 150 sx Class "H" with 8#/sx CSE + .5#/sx Gilsonite + 6/10% CF-14 + .35% Thriftylite (yield 1.75, wt 13.6). Tailed in with 60 sx Class "H" with 10% Thixad + 8#/sx Hiseal + 10% Salt (yield 1.38, wt 15.5). PD 2:56 PM 11-15-93. Bumped plug to 1000 psi for 1 minute. Circulated 0 sacks. Circulated through DV tool 3 hours. Stage II: 450 sx PSL "C" with 5#/sx Gilsonite + 5#/sx Salt + 4/10% CF-14 (yield 1.85, wt 12.68). Tailed in with 200 sacks "H" + 8#/sx CSE + 5#/sx Gilsonite + 6/10% CF-14 + .35% Thriftylite (yield 1.75, wt 13.6). PD 7:00 PM 11-15-93. Bumped plug to 3000 psi for 1 minute. WOC 18 hours.



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

Signed David R. Glass
(This space for Federal or State office use)

Title Production Supervisor

Date 11-17-93

Approved by _____
Conditions of approval, if any:

Title _____

Date _____