

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st Street  
Artesia, NM 88210-2834  
FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

**SUMMARY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.**

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NM-82904	
2. Name of Operator Yates Petroleum Corporation		6. If Indian, Allottee or Tribe Name	
3a. Address 105 S. 4th St. - Artesia, NM 88210	3b. Phone No. (include area code) 505-748-1471	7. If Unit or CA/Agreement, Name and/or No.	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' ESL & 1650' FEL of Section 6-T24S-R31E (Unit 0, SWSE) <i>S Sand Dunes</i>		8. Well Name and No. Adeline ALN Federal #15	
		9. API Well No. 30-015-27328	
		10. Field and Pool, or Exploratory Area Wildcat Delaware	
		11. County or Parish, State Eddy Co., NM	

**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"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Add perfs in
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Delaware; acidize
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	& frac

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

10-2-2000 - Moved in pulling unit and doing repair work on pulling unit.  
10-3-2000 - TOOH with rods and pump. Released tubing anchor. TOOH with tubing. Shut well in for night.  
10-4-2000 - Rigged up wireline. TIH with 4" casing guns and perforated 7590-7602' w/13 .42" holes (1 SPF - Delaware). TOOH with casing guns and rigged down wireline. TIH with RBP and packer. Set RBP at 7702' and tested to 1500 psi. Pulled packer to 7482'. Acidized perforations 7590-7602' with 1000 gallons 7-1/2% NEFE acid. Swabbed. Shut well in.  
10-5-2000 - Bled well down. Swabbed. Shut well in.  
10-6-2000 - Bled well down. Swabbed. Loaded tubing. Released packer. TIH and latched onto and released RBP. Moved RBP and tested to 1500 psi. TOOH with packer. Shut well in.  
10-7-9-2000 - Rigged up wireline. TIH with 4" casing guns and perforated 6861-6871' w/11 .42" holes (1 SPF - Delaware). TOOH with casing guns and rigged down wireline. TIH with packer to 6750' and set packer. Acidized perforations 6861-6871' with 1000 gallons 7-1/2% iron control HCl acid and ball sealers. Swabbed. Shut well in.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

CONTINUED ON NEXT PAGE:

Rusty Klein

Title Operations Technician

Signature

Date Oct. 30, 2000

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

