

UNITED STATES
DEPARTMENT OF THE INTERIOR

OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on
reverse side)

Roswell District
Modified Form No.
M060-3160-4

45P

Artesia, NM 88210 BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL GAS WELL OTHER SEP 04 '90

2. NAME OF OPERATOR
YATES PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR
105 South 4th St., Artesia, NM 88210

3a. Area Code & Phone No.
505/748-1471
ARTESIA OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FSL & 660' FZL, Sec. 21-6S-25E

14. PERMIT NO.
30-005-62872

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3738' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM 3051

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Hewitt IM Federal

9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND
SUBVY OR ARMA
Unit L, Sec. 21-T6S-R25E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) REPORT 1ST PRODUCTION

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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.)

WELL CONNECTED TO TRANSWESTERN PIPELINE CO. FOR 1ST PRODUCTION & SALES 8-30-90.

RECEIVED
Aug 31 8 17 AM '90
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

18. I hereby certify that the foregoing is true and correct
SIGNER [Signature] TITLE Production Supvr. DATE 8-30-90
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
DATE PETER W. CHESTER
AUG 31 1990
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side