

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NM Oil Conservation
Artesia, NM 88210

BLM Roswell District
Modified Form No.
NM60-3160-4

C/58

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		3a. Area Code & Phone No. 505/748-1471		5. LEASE DESIGNATION AND SERIAL NO. NM 36714	
2. NAME OF OPERATOR YATES PETROLEUM CORPORATION				6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
3. ADDRESS OF OPERATOR 105 South 4th St., Artesia, NM 88210		RECEIVED MAR 6 1991 O. C. D. ARTESIA, OFFICE		7. UNIT AGREEMENT NAME Blackwater Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL & 660' FWL, Sec. 19-9S-22E				8. FARM OR LEASE NAME -----	
14. PERMIT NO.		15. ELEVATIONS (Show whether DP, RT, GR, etc.) 4309' GR		9. WELL NO. 1	
				10. FIELD AND POOL, OR WILDCAT Wildcat Abo	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit D, Sec. 19-T9S-R22E	
				12. COUNTY OR PARISH Chaves	
				13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Change surface casing, spud	<input checked="" type="checkbox"/>		

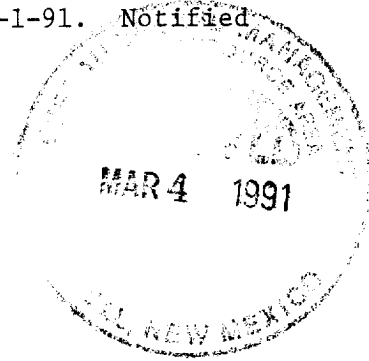
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.) *

Received verbal permission from Peter Chester, BLM, Roswell, NM, 2-28-91 to change casing program as follows:

From: 12-3/4" hole size - 9-5/8" casing 43.5# set @ 750'
To: 12-1/4" hole size - 8-5/8" casing 24# set @ 900'

Spudded with Auger Air Drilling Co. 26" hole at 7:00 PM 2-28-91. TD 26" hole 1:30 AM 3-1-91 at 39'. RU and run 40' of 20" pipe. Will cement 9:00 AM 3-1-91. Notified Pat Flannery, BLM, Roswell, NM, of spud.



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

SIGNED [Signature] TITLE Production Supervisor DATE 3-1-91

(This space for Federal or State office use)

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

*See Instructions on Reverse Side