

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

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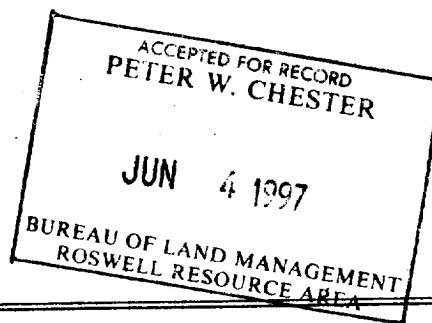
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	JUN - 6 1997	5. Lease Designation and Serial No. NM-9982
2. Name of Operator YATES PETROLEUM CORPORATION	(505) 748-1471	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210	DIST. 2	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' FSL & 2200' FEL of Section 13-T6S-R25E (Unit 0, SWSE)		8. Well Name and No. Teckla MD Federal #9
		9. API Well No. 30-005-63101
		10. Field and Pool, or Exploratory Area Pecos Slope Abo
		11. County or Parish, State Chaves Co., NM

12. CHECK APPROPRIATE BOX(s) 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 type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Production casing & cement</u>	<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 4245'. Reached TD at 4:45 AM 5-21-97. Ran 96 joints of 4-1/2" 10.5# J-55 (4240.70') of casing set at 4235'. Float shoe set at 4235'. Float collar set at 4190'. Bottom marker set at 3562'. Top marker set at 3541'. Cemented with 50 sacks Class C, 3% SM and 1/4#/sack celloflake (yield 2.87, weight 11.4). Tailed in with 350 sacks Super C Modified, 3% FL52, 5#/sack gilsonite and 4#/sack salt (yield 1.71, weight 13.0). PD 4:00 PM 5-21-97. Bumped plug to 1300 psi for 1 minute, OK. WOC. Released rig at 7:30 PM 5-21-97.
NOTE: Displaced with 2% KCL.

Waiting on completion unit.



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1997 MAY 30 P 9:24
BUREAU OF LAND MANAGEMENT
ROSWELL OFFICE

14. I hereby certify that the foregoing is true and correct
Signed Peter W. Chester Title Operations Technician Date May 29, 1997
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: