

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

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 RECEIVED

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

TXO Production Corp.

3. Address and Telephone No.

415 W. Wall, Suite 900, Midland, Texas 79701

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2811 02450' FSL, 100' FEL, Unorthodox location approved by NMOCC
Sec 18, T-20-S, R-29-E

5. Lease Designation and Serial No.

NM-01165

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Yates Federal #16

9. API Well No.

10. Field and Pool, or Exploratory Area

Und. Burton Delaware

11. County or Parish, State

Eddy

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 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 type="checkbox"/> Other
	<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.)*

9-29-90 ran 77 jts 7", 20# k-55, ST&C csg. ^{@ 3112'} Set & cmt w/400 sx Howco litewt cmt w/6# salt/sk, 6/10 of 1% CFR3 followed w/200 sx C neat w/2% CaCl w/2/10 of 1% Hal4; circ 75 sx to surf. PD 2:15 AM, 9-29-90

9-30-90 Drlg

10-1-90 Drlg

10-2-90 TD 6 1/4" hole @ 5 PM, 10-1-90; ran open hole logs, evaluating logs.

10-3-90 TD 3700'. Ran 90 jts 4 1/2", 10.5#, K55, ST&C csg. ^{SET @ 3700'} cmt w/130 sx 50-50 poz, 5# salt/sk, 3/10 of 1% of HAL4, 3/10 of 1% CFR3. PD 4:30 PM, 10-2-90, rel rig @ 6:30 PM, 10-2-90.

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

Signed Karen Jensen

Title Secretary

Date 10/16/90

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____