Form 3160~5	. 4 77 77 6	OFFICE FOR NUMBER	— Modified Form t		
(July 1989) UNITE' ST (Formerly 9-331) DEPARTMENT C. T		OF COPIES RECUIRED	N-1060-3160-4 3. LEABE DESIGNATION		
BUREAU OF LAND N			NM 82918	H AND BEELAL NO.	
		WELLC	6. IF INDIAN, ALLOTT	ER OR TRIBE NAME	
SUNDRY NOTICES AND (Do not use this form for proposals to drill or to use "APPLICATION FOR PERM					
J. OIL 「切 GAB 「」			7. UNIT AGREEMENT N	AME	
WELL WELL OTHER 2. NAME OF OPERATOR		2a Americado f Maria	No. 8. PARM OR LEASE NA	WP	
YATES PETROLEUM CORPORATION 3a. Area Code & Phone No. 505/748-1471				Sooner AHP Federal	
3. ADDRESS OF OPERATOR	<u> </u>		9. WELL NO.		
105 South 4th St., Artesia, NM 8			11		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			Lane Abo	Lane Abo	
410' FSL & 2310' FWL, Sec. 26-9S-33E unt 77			11. SEC., T., R., M., OR SURVEY OR ARM	11. SEC., T., E., M., OR BLK. AND SURVEY OR ARMA	
			Unit N, Sec.	26-T9S-R33E	
1200	(Show whether DF, RT, GI	i, etc.)	12. COUNTY OR PARIS	1	
30-025-30938 4302.	6' GR		Lea	NM	
16. Check Appropriate Box	To Indicate Nature	of Notice, Report, or	Other Data		
NOTICE OF INTENTION TO:	1	80 88	EQUENT REPORT OF:		
TEST WATER SHUT-OFF PULL OR ALTER CAS	SING	WATER SHUT-OFF	X REPAIRING	WELL	
FRACTURE TREAT MULTIPLE COMPLET	те	FRACTUBE TREATMENT	ALTERING C	DNIBA	
SHOOT UR ACIDIZE ABANDON*		SHOOTING OR ACIDIZING	ABANDONME	NT.	
REPAIR WELL CHANGE PLANS		(Other)	its of multiple completion	on Well	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly a proposed work. If well is directionally drilled, give nent to this work.) *	state all pertinent deta subsurface locations a	Completion or Recoi	apletion Report and Log for	rm.)	
Ran 9 joints 13-3/8" 54.5# J-55 ST set 339'. Cemented w/400 sx Class 9-27-90. Bumped plug to 750 psi, out 9:45 PM 9-27-90. WOC 12 hrs. Drilled plug and resumed drilling.	s C w/2% caCl2 float held oka Cut off and v	(yield 1.32, wt.	. 14.8). PD 9:45 Llated 75 sacks.	5 AM Drilled	
			AREA EREA E	OCT 9	
				ID 20 I	
				0 /M	
	Δ.4		. 76.5		
	1102	<u> </u>	76 C	190	
		•			
18. I hereby certify that the foregoing is true and correct					
SIGNED Landa Doubles	TITLE Produc	tion Supvr.	DATE 10-2	2-90	
(This space for Federal or State office use)					
APPROVED BY	TITLE	···	DATE		
CONDITIONS OF APPROVAL, IF ANY:					

CCD HOBBS OFFICE