

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

Form approved
Index Bureau No. 1001-017
Expires August 31, 1987

5. LEASE DESIGNATION AND SERIAL NO.

NM 57700

6. IF INDIAN, ALLOTTEE OR TRIBE, NAME

ORDINARY NOTICES AND REPORTS ON WELLS

(This form is to be used for proposals to drill or to deepen or plug back to a different reservoir.
It is APPLICATION FOR PERMIT "A" for each proposal.)

1. OIL, GAS, WELL, XX, OTHER
2. NAME OF OPERATOR
Yates Petroleum Corporation
3. ADDRESS OF OPERATOR
105 South 4th St., Artesia, NM 88210
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
330' FSL & 990' FEL, Sec. 22-T7S-R35E

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Crossroads AFX Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA

Unit P, Sec. 22-T7S-R35E

12. COUNTY OR PARISH

Roosevelt

13. STATE

NM

14. PERMIT NO.

API #30-041-20841

15. ELEVATION (Show whether DE, RL, GR, etc.)

4194.6' GR

16

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	PULL OR ALTER CASING
FRACTURE TREAT	MULTIPLE COMPLETE
SHOOT OR ACIDIZE	ABANDON*
REPAIR WELL	CHANGE PLANS
OTHER	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREATMENT	ALTERING CASING
SHOOTING OR ACIDIZING	ABANDONMENT*
(Other) 1st oil production	X

(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.) *

FIRST OIL PRODUCTION - 2-13-88.

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

SIGNED [Signature]

TITLE Production Supervisor

DATE 2-17-89

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

MAR 14 1989