

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

NATIONAL CONSTRUCTION COMMISSION
(Other instruction...)
Drawn by DD

Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back or to convert a well to a reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 20364	
2. NAME OF OPERATOR Yates Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990 FSL & 990 FWL, Sec. 19-T7S-R30E		8. FARM OR LEASE NAME Pendleton ZB Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4097' GR		10. FIELD AND POOL, OR WILDCAT Wildcat San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit M, Sec. 19-T7S-R30E	
		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) <input type="checkbox"/>	

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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input 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.)

TD 3500'. Ran 84 joints of 4-1/2" 9.5# J-55 ST&C casing set 3500'. 1-regular guide shoe set 3500'. Float collar set 3457'. Cemented w/300 sacks Class C, .5% CF-1, .2% AF-S, 3% KCL. Compressive strength of cement - 950 psi in 12 hours. PD 11:00 AM 3-26-84. Bumped plug to 1000# for 30 minutes, released pressure, float and casing held okay. WOC 18 hours. WIH and perforated 3182-85' w/6 .42" holes (2 SPF). Set packer at 3150'. RBP at 3197'. Swabbed dry. Acidized perms 3182-85' w/500 gal 20% DS-30 acid and 10 ball sealers. Moved BP to 3165'. Tested to 2000#, OK. TOOH w/packer. WIH and perforated 3097-3133' w/10 .42" holes as follows: 3097, 3111, 12, 13, 14, 21, 27 1/2, 31, 32, 33'. RIH w/packer and set at 3050'. Acidized perms 3097-3133' w/2000 gal 20% DS-30 acid and 15 ball sealers. No show of oil. Set BP at 3060'. Tested to 2000#, OK. TOOH w/packer. Perforated 3025-38' w/9 .42" holes as follows: 3025, 26, 27, 28, 29, 30, 31, 36 and 38'. TIH and set packer at 2990'. Acidized perms 3025-38' w/1500 gal 20% DS-30 acid and 15 ball sealers. Swabbing well.

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

SIGNED Peter W. Chester TITLE Production Supervisor DATE 4-20-84

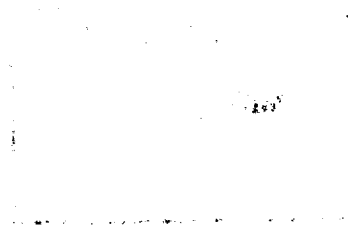
(This space for Federal or State office use)
ACCEPTED FOR RECORD

APPROVED BY PETER W. CHESTER TITLE Production Supervisor DATE 4-20-84

CONDITIONS OF APPROVAL, IF ANY:

MAY 16 1984

*See Instructions on Reverse Side



RECEIVED

MAY 21 1984

CLERK
HOBBS CLERK