

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Other instruction
reverse side)

DATE
re

Form approved: 30-025-30808
Budget Bureau No. 1000-1
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 to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. NM - 59392
2. NAME OF OPERATOR Yates Petroleum Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 105 South Fourth Street, Artesia, New Mexico 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 800' FNL & 1650' FEL	8. FARM OR LEASE NAME Lusk "AHB" Federal
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3565.9	10. FIELD AND POOL, OR WILDCAT Undesignated Wildcat Morrow
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 35-T19S-R32E
	12. COUNTY OR PARISH Eddy
	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 checked="" 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 checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<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 type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)*

Yates Petroleum Corporation wishes to change the proposed casing and cementing program, the mud program, propose new tops and a new total depth of 13,900'. Also, find attached a new Exhibit B - Blowout Preventor.

[Secretary's Potash]

PROPOSED CASING AND CEMENTING PROGRAM [Capitan Controlled Water Basin]

Size of Hole	Size of casing	Weight per foot	Setting Depth	Quantity of Cement
17-1/2	13-3/8	54.50#	1140	WITNESS 1150 sx <u>circulated</u>
12-1/4	8-5/8	32#	4900	WITNESS 2500 sx <u>circulated</u>
7-7/8	5-1/2	17 & 20#	TD	As warranted

MUD PROGRAM: FW to 1140'; Brine to 4900', cut brine to TD.

Yates Petroleum Corporation wishes to propose new tops, and they are the following:

Rustler	1055
Yates	2850
Delaware	4710
Bone Springs	7610
Wolfcamp	10850
Strawn	11730
Atoka	12420
Morrow	12770
TD	13900

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

SIGNED [Signature]

TITLE Landman

DATE 2-23-90

(This space for Federal or State office use)

App. Signed by Shannon J. Shaw

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

PERSONNEL SIGNATURE

DATE 2 26 90

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS
ATTACHED

*See Instructions on Reverse Side