

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES RETURN
(Other instructions
verse side)

MM Roswell District

Modified Form No.

NM60-3160-4

5. LEASE DESIGNATION AND SERIAL NO.

NM 59302 59392

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lusk AHB Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

East Lusk
Under Delaware

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

Unit G, Sec. 35-T19S-R32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Workover	
2. NAME OF OPERATOR YATES PETROLEUM CORPORATION	3a. Area Code & Phone No. 505/748-1471
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 1930' FNL & 1650' FEL, Sec. 35-19S-32E	
14. PERMIT NO. 30-025-31042	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3566' GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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 checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Propose to perforate, treat <input checked="" type="checkbox"/>	

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"/>	

(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.)*

Propose to move RBP set 7900' down hole to \pm 8550' and test to 2000 psi. Perforate 7503-14' (7 holes) 7534-46' (5 holes) and 7946-62' (9 holes). RIH w/tubing, packer and new RBP to 8000', set RBP and test. Pull packer to 7962', spot 1 bbl acid across perfs, pull packer to 7900' and set, breakdown perfs. Spot acid to packer and acidize with 1500 gals 10% NEFE acid and 15 balls. Will frac if necessary.

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

SIGNED Rebecca D. Doolittle

TITLE Production Supervisor

DATE 3-12-91

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE 3-20-91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side