

Form 3160-5
 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
 Budget Bureau No. 1004-0135
 Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
 Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM - 077004
2. Name of Operator YATES ENERGY CORPORATION	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. BOX 2323 ROSWELL, NM 88202 505-623-993	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FVL • 1980' FVL SEC 17, T-19-S, R-33-E	8. Well Name and No. HUDSON FEDERAL #1
	9. API Well No. 30 - 025 - 30546
	10. Field and Pool, or Exploratory Area GOM - MARRON
	11. County or Parish, State LEA CO., NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other MIT TEST
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

11/30/95 SET CBP @ 8950' AND CAP WITH 20' OF CEMENT.
LOADED CASING WITH 20 BBL WATER.
PRESSURE TESTED 5 1/2" CASING TO 500 PSI FOR
30 MINS. PRESSURE BLEED TO 460 PSI. VALVES ON
INTERMEDIATE CASING AND SURFACE CASING WERE OPEN
WITH NO BLOW. CHART ATTACHED. TEST WITNESSED
BY STEPHEN CAFFEY WITH BLM.

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

Signed [Signature] Title ENGINEER Date 12/6/95

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

***See Instruction on Reverse Side**

PRINTED IN U.S.A.

DAY

NIGHT

CALIBRATED
CHARTS

YATES ENERGY CORP
HUDSON PER

WATER NUMBER
TIME TAKEN BY
DATE TAKEN BY

TIME TAKEN BY
DATE TAKEN BY

BR-2221
B 0-1000-8

11-30-95

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

U.M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS NEW MEXICO 88240

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Budget Bureau No. 1004-0135
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2. Name of Operator YATES ENERGY CORPORATION	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. BOX 2323 ROSWELL, NM 88202 505-623-4935	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FAL & 1980' FEL SEC 17, T19S - R33E	8. Well Name and No. HUDSON FEDERAL #1
	9. API Well No. 30 - 025 - 30546
	10. Field and Pool, or Exploratory Area GEM MIDDLE
	11. County or Parish, State LEA CO, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other MECHANICAL INTEGRITY TEST
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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WILL SET CIP @ 8950' AND CAP W/ 20' CEMENT.
THE HOLE WILL BE LOADED WITH WATER AND THE
CASING WILL BE TESTED TO 500 PSI FOR 1 HR.
WILL NOTIFY BLM IN SUFFICIENT TIME TO WITNESS MIT.

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

Signed **[Signature]** Title **ENGINEER** Date **11/13/95**

(This space for Federal or State office use)

Approved by **(CORR. SCD.) JOE G. LARA** Title **PETROLEUM ENGINEER** Date **1/9/96**
Conditions of approval, if any: