

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  
☒ Oil Well ☐ Gas Well ☐ Other **WORKOVER**

2. Name of Operator  
**YATES PETROLEUM CORPORATION**

3. Address and Telephone No.  
**105 South 4th St., Artesia, NM 88210 (505) 748-1471**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**Unit L, 1980' FSL, 660' FWL, Sec. 6-T22S-R32E**

5. Lease Designation and Serial No.

**NM 64605**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. **FED.**  
**Rosemary AJB State #1**

9. API Well No.  
**30-025-31227**

10. Field and Pool, or Exploratory Area  
**Undes. Delaware**

11. County or Parish, State  
**Lea, 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 type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <b>Add perforations, treat existing zone</b>	<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.)\*

Add Delaware Sand pay to existing perforations at 7134-7157 as follows:

7-18-91. Perforated 8391, 92, 93, 96, 97 (5 holes); 8305, 06, 23, 24, 28, 29, 30 (7 holes); 7766, 67, 68, 69, 70 (5 holes); 7471, 74, 77, 79, 81 (5 holes); 7289, 92, 93, 94, 7302, 03, and 7304' (7 holes). Acidized as follows: 8391-97' w/750g. 7½% NEFE; 8305-30' w/1000g. 7½% NEFE; 7766-70' w/750g 7½% NEFE. Frac'd zones 8391-97' and 8305-30' w/7500g. 40# XL gel with 22500# 20/40 resin coated sand. Acidized 7471-81' w/750g. 7½% NEFE acid. Frac'd perms 7471-81' w/20000g. 40# XL gel and 19500# 20/40 sand. Acidized perms 7289-7304' w/1000g. 7½% NEFE.  
8-8-91. Hung well on pump. Returned to production.

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

Signed [Signature]

Title **Production Supervisor**

Date **9-6-91**

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

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

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SEP 23 1991

ON

HOBBS OFFICE