Submit 3 Copies
to Appropriate
District Office

State of New Mexico

to Appropriate District Office	Energy, Minc. als and Natural Resources Department			Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVA P.O. Be			WELL API NO.	
DISTRICT II	Santa Fe, New M			30-025-3188	9
P.O. Drawer DD, Artesia, NM 88210				5. Indicate Type of L	ease STATE K FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & Gas L VB-134	ease No.
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" (FORM C-101) FOR SUCH PROPOSALS.)				7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL OAS WELL X WELL OTHER				Kiwi AKX State	
2. Name of Operator YATES PETROLEUM CORPORATION				8. Well No. 8 .	
3. Address of Operator				9. Pool name or Wildcat	
105 South 4th St., Artesia, NM 88210 4. Well Location				tast Livingston Ridge Delaware	
	1980 Feet From The North	<u> </u>	Line and231	O Feet From T	he West Line
Section 16	Township 22S	Ra		NMPM L	ea County
	///////	whether 1 3746	DF, RKB, RT, GR, etc.) GR		
11. Check	Appropriate Box to Ind			eport, or Other I	Data
	ITENTION TO:		_	SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	A	LTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING	GOPNS. P	LUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND C				EMENT JOB	
OTHER:			OTHER: Perfor	ate, Treat	<u> </u>
12. Describe Proposed or Completed Ope work) SEE RULE 1103.	erations (Clearly state all pertinent of	letails, ar	nd give pertinent dates, inclu	ding estimated date of s	tarting any proposed
at 7220'. Tested t acidized w/500 gals	to 1500 psi. Circuls $7\frac{1}{2}\%$ HCL. Swabbed fs 7183-85' w/500 g sand. Washed sand	lated dry. gals : off l	hole with 2% Ko 35# linear gel, RBP. TIH with p	CL. Straddle 4350 gals 35	r and RBP. Set RBP d perfs 7183-85' and # XL gel with 12000# and hang well on
I hereby certify that the information above is	true and complete to the best of my know	vledge and	l belief.		
SIGNATURE Carula	Χ		Production S	upervisor	рате4-7-93
TYPE OR PRINT NAME Juani	ta Goodlett				TELEPHONE NO. 505/748-14
60 L 6 - 6 - 6 - 7 L					

APPROVED BY ---

CO SINAL SECUSION GY JERRY SEXTON

WEIGHT I SEPERVISOR

APR 1 2 1993

- TITLE -

CONDITIONS OF APPROVAL, IF ANY: