

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD	5. Lease Designation and Serial No. NM-14329
2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit J, 1980' FSL & 1980' FEL of Section 8-T21S-R32E	8. Well Name and No. Union AJS Federal #1
	9. API Well No. 30-025-31412
	10. Field and Pool, or Exploratory Area Wildcat - Delaware
	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 Perfs, acid & frac
	<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.)*

CONTINUED FROM PREVIOUS PAGE:

7-19-93 - CONTINUED:

and laid down 2-7/8" N-80 tubing.. TIH w/nickel plated packer and 3-1/2" plastic coated tubing to 4752'. Reverse circulated annulus with packer fluid. Set packer at 4752'. Tested annulus to 1000# for 30 minutes, OK. Nippled down BOP and nipped up injection wellhead. Released to production department. NOTE: Notified Bonnie with OCD - Hobbs to witness casing integrity test. Was not witnessed.

ORDER #SWD-458

14. I hereby certify that the foregoing is true and correct		
Signed <u>Rusty Allen</u>	Title <u>Production Clerk</u>	Date <u>Oct. 25, 1993</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		