Form 716045  (June 1990)  DEBARTMENT OF THE BUREAU OF LAND MAN  SUNDRY NOTICES AND REP  Do not use this form for proposals to drill or to deep Use "APPLICATION FOR PERM  SUBMIT IN TR.  1. Type of Well  Well Gas Well Other  2. Name of Operator YATES PETROLEUM CORPORATION  3. Address and Telephone No. 105 S. 4th Street, Artesia, NM 88210  4. Location of Well (Footage, Sec., T., R., M., or Survey Descripti	Hobbs, NM 88241  ORTS ON WELLS en or reentry to a different reservoir. IT-" for such proposals  IPLICATE  (505) 748-1471	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993  5. Lease Designation and Serial No. NM-81274  6. If Indian, Allottee or Tribe Name  7. If Unit or CA, Agreement Designation  8. Well Name and No. Thyme APY Federal #2  9. API Well No. 30-025-33529  10. Field and Pool, or Exploratory Area Red Tank Bone Springs
Unit G, SWNE, 1650' FNL & 1650' FEL 5	Sec. 1-T23S-R32E	11. County or Parish, State Lea County, NM
12. CHECK APPROPRIATE BOX(s) TO	D INDICATE NATURE OF NOTICE, R	EPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	N
Subsequent Report  Final Abandonment Notice  13. Describe Proposed or Completed Operatons (Clearly state all pertidrilled, give subsurface locations and measured and true vertical described of the subsurface locations and measured and true vertical described of the subsurface locations. The weak of the subsurface locations are measured and true vertical described of the subsurface locations and measured and true vertical described of the subsurface locations. The water will be stated the Kiwi AKX State #8, Sec. 16-T22S-R32.	plication for produced water from the all at present produces 63 Bbls. of water ored in a 500 Bbl. fiberglass tank and	above well pursusant to r per day from the
	SEE ATTACHED FOR COMMITTIONS OF ASPRO	Alice Solution
14. Thereby certify that the foregoing is true and correct	Title Production Secretary	Date 10/22/96
(This space for Federal or State office use)		Date 10/22/90
Approved by Conditions of approval, if any:	PETROLEUM ENGINEE	Date 10/30/91

\*See Instruction on Reverse Side