

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. NM-81274
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) 1650' FNL & 1650' FEL of Section 1-T23S-R32E (Unit G, SWNE)		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 Spring
		11. County or Parish, State LEA Eddy 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 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 Production casing & cmt	<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.)*

TD 9154'. Reached TD at 8:45 PM 9-27-96. Ran 215 joints of 5-1/2" 17# & 15.5# casing as follows: 18 joints of 5-1/2" 17# J-55 sandblasted (752.99'); 24 joints of 5-1/2" 17# J-55 varnished (986.98'); 145 joints of 5-1/2" 15.5# J-55 varnished (6218.14') and 28 joints of 5-1/2" 17# J-55 varnished (1206.03') (Total 9164.14') of casing set at 9153'. Float shoe set at 9153'. Float collar set at 9109'. Marker joints set at 8400' and 7413'. Pumped 150 bbls nitrified mud, 20 bbls 30# gel and 10 bbls fresh water ahead of 700 sacks "C" (65-35-6), .5% FL52 and .25#/sack celloflake (yield 1.94, weight 12.5). Tailed in with 225 sacks Super C (65-15-11), 5#/sack gilsonite, .35#/sack FL52, .44#/sack FL25 and 1/4#/sack celloflake (yield 1.64, weight 13.0). PD 11:15 AM 9-28-96. Bumped plug to 2800 psi for 5 minutes, OK. Cement did not circulate. WOC. Released rig at 3:15 PM 9-29-96.

Waiting on completion unit.

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID R. GLASS
OCT 6 9 1996

RECEIVED
OCT 3 12 42 PM '96
CARL AREA

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

Signed Rusty Allen Title Operations Technician Date Oct. 2, 1996

(This space for Federal or State office use)

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