

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-15317

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

105 South Fourth Street - Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

1980' FSL & 660' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3426.2' GR

7. UNIT AGREEMENT NAME

Paduca Unit

8. FARM OR LEASE NAME

Paduca Unit

9. WELL NO.

#3

10. FIELD AND POOL OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Section 23-T25S-R32E

12. COUNTY OR PARISH

Lea

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) BOP Test

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. 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 perti-
nent to this work.)

On October 6, 1988, Safety Test of Texas performed the Blowout Preventer Pressure test.
Tested as follows:

Upper pipe rams to 2500#
Lower pipe rams to 2500#
Blind rams to 2500#

Choke line to 5000#
choke manifold to 5000#
Upper Kelly cock to 5000#

Lower Kelly cock to 5000#
Inside preventor to 5000#

See attached invoice.

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

SIGNED

Lusty J. J. J.

TITLE

Regulatory Secretary

DATE October 11, 1988

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

OCT 13 1988

SJS

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

RECEIVED

OCT 14 1988

**CCO
HOBBY OFFICE**



SAFETYTEST
Safety Test of Texas

P.O. Box 5013
Hobbs, N.M. 88241
Hobbs (505) 397-4414
Odessa (915) 333-6393

N^o 1338

RENTED TO

Yates Petroleum

P.O. NO. 30343

DATE 10-6-88

ORDERED BY

Jim

Lease

Paduca Unit #3

Rental begins when tools leave warehouse and continues until returned thereto. Rental day starts at midnight and part day shall be charged as full day.

SAFETY TEST PORTABLE BLOWOUT PREVENTER PRESSURE TESTING SERVICE:

Set up charge

\$ 450⁰⁰

hourly rate 14 hrs @ 60⁰⁰ per hr.

\$ 840⁰⁰

Items Tested:

rams to

#

1034

Csg. to

2500

#

U. Kelly Cock

5000

#

upper PIPE

rams to

2500

Hydril B O P to

—

#

L Kelly Cock

5000

#

lower PIPE

rams to

2500

Choke Line

5000

#

Safety Valve

5000

#

blinds to

2500

Choke Manifold

5000

#

Inside Preventer

5000

#

TEST SUBS

2-4 1/2 IF

\$

OTHER

1 - Dry run charge

350⁰⁰

NM TAX

88¹⁵

TRANSPORTATION: To and From Job Site

We Appreciate Your Business

Thank You! Dave

UNIT NO.

104

TOTAL — \$

1728¹⁵

TERMS: NET CASH — NO DISCOUNT. (PRICES SUBJECT TO CHANGE WITHOUT NOTICE): Terms and Conditions Under Which Tools and Other Equipment Are Rented: Lessor exercises precautions to keep its tools and other equipment in good condition, but does not guarantee its condition. All tools and other equipment rented from Lessor is used at Lessee's sole risk. Lessee agrees that Lessor shall not be liable for any damages for personal injuries to any persons or for any damage to Lessor's property or the property of other persons that may be caused by any of such tools or other equipment, or that may be caused by its failure during use, and Lessee hereby agrees to hold harmless and indemnify Lessor against all persons for all personal injuries and / or property damage. Well conditions which prevent satisfactory operation of equipment do not relieve Lessee of his responsibility for rental charges. Lessee assumes all responsibility for equipment while out of possession of the Lessor and promised to return such equipment to the Lessor in as good condition as it was at the effective date of the lease, natural wear and tear from reasonable use thereof excepted. All equipment lost or damaged beyond repair will be paid for by the Lessee. Accrued rental charges cannot be applied against the purchase price or cost of repairs of such damaged or lost equipment. All transportation charges must be borne by the Lessee. Rental begins when equipment leaves Lessor's yard and continues until returned thereto. ALL TOOLS AND EQUIPMENT SHALL REMAIN the sole property of Lessor. This lease is made and shall be effective when the equipment is delivered to the carrier selected by the Lessee.

Invoices are rendered upon completion of work. Charges are net cash payable at office from which invoice is rendered. Interest at the rate of 1 1/2 per cent (1 1/2 %) per month will be charged on invoices not paid within thirty (30) days. All applicable Local, State and Federal taxes to be paid by Customer.

Delivered By

Rory Wilson

CUSTOMER'S REPRESENTATIVE

By Jim Huzme

RECEIVED

OCT 14 1988

OCD
HOBBS OFFICE



SAFETY TEST

Safety Test of Texas

P.O. Box 5013
Hobbs, N.M. 88241
Hobbs (505) 397-4414
Odessa (915) 333-8393

DATE 10-6-88 CONTRACTOR Turner/sharp RIG NO. 71
COMPANY Vates pet WELL NAME Paduca unit #3
L.S.D. _____ FIELD/AREA _____

Test was made with _____ (plug) and bridge plug (packer) or both _____

Arrived location and rig was (doing what) coming out of hole

What changes (if any) were made to BOP hook-up since previous test:

Closing System:

1. List any delay observed to operation of BOP's during test; and, loss of closing pressure (other than Hydril test) _____ (corrected) _____

2. List items replaced during testing bonnet ring on valve #12

3. Closures were made using pump _____ accumulators _____ or both ☒ with observed pressure of 1500 for test to ram type BOPs and _____ for test to Hydril.

4. Accumulators bottles (16) were pressured to 3000 at end of test.

5. Control valves operated as indicated on closing unit manifold except: _____

6. Extensions were (_____) or were not (☒) hooked up to BOP's at end of test.

No test desired to Hydril

Items leaking at the conclusion of testing and/or malfunction of BOP's at end of test.

No test desired on Hydril OK'd by AL Springer

Company representative Jim Kutz Phone _____

Rig Supervisor _____ Phone _____