

November 1983)
Formerly 9-331)

UNITED STATES MINERAL COMMISSION
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
88210

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM05020

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

ARROWHEAD OIL CORPORATION

3. ADDRESS OF OPERATOR

BOX 548, Artesia, N.M. 88210

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

At surface 2260'FNL, 2260FWL

RECEIVED BY

JUN 16 1986

O. C. D.

OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

H. E. Yates A FED.

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

N. H. Yates A. Yates - S.

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

27-19S-31E

14. PERMIT NO.

15. ELEVATIONS (Show whether SF, ST, OR, etc.)

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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☒

(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 pertinent to this work.)

PLUGGED AND ABANDONED AS FOLLOWS:

BROKE CIRCULATION & PUMPED GEL MUD, CIRCULATED.

SET 50SX, PLUGGED @ 2300', TAGGED @ 1617'.

PERFORATED 2 HOLES @ 750'.

BROKE CIRCULATION, PUMPED 170SX AND CIRCULATED CEMENT TO SURFACE.

INSTALLED DRY HOLE MARKER.

WORK WITNESSED BY PETE Hienz

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

SIGNED

TITLE Production Clerk

DATE Feb. 10, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Post ID-2
3-14-86
PFA