

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	RECEIVED SEP 4 1985
2. NAME OF OPERATOR Yates Drilling Company	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210	BUREAU OF LAND MANAGEMENT FARMINGHORE RESERVE
4. LOCATION OF WELL (Report location clearly and in accordance with a well location report. See also space 17 below.) At surface 442' FSL & 344' FWL, Sec. 18-T23N-R8W	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6949' GR

5. LEASE DESIGNATION AND SERIAL NO. NM 25830	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
7. UNIT AGREEMENT NAME N/A	
8. FARM OR LEASE NAME Axem-Federal	
9. WELL NO. 1	
10. FIELD AND POOL, OR WILDCAT Unnamed	
11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Unit M, Sec. 18-23N-8W	
12. COUNTY OR PARISH San Juan	13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input checked="" type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input checked="" type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Perforate, Treat	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(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.) *

- 8-28-85. TD 5030'. RUPU.
8-29-85. Drilled out DV tool at 3846'. Tested to 2000#, OK. Spotted 1000 gals 7½% acid.
8-30-85. WIH and perforated 4707-4941' w/11 .42" holes as follows: 4707, 13, 4813, 28, 59, 83, 91, 4911, 23, 31 and 41'.
8-31-85. WIH and perforated 4708-4939' w/13 .42" holes as follows: 4708, 10, 12, 4811, 16, 21, 24, 57, 72, 84, 94, 4929 and 39'. Frac'd perfs 4707-4941' (24 holes) w/1500 gals 7½% acid, 140000 gals gelled 2% KCL water and 240000# 20/40 sand.
9-2-85. Set pumping equipment.

RECEIVED
SEP 11 1985
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct
SIGNATURE Ernesta Goodlett TITLE Production Supervisor DATE 9-3-85
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side