

UNITED STATES N. M. OIL AND GAS COMMISSION
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
PO BOX 1980
SBS, NEW MEXICO 88240

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 GAS WELL OTHER Convert to SWD

2. NAME OF OPERATOR
Yates Petroleum Corporation

3. ADDRESS OF OPERATOR
105 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1650 FNL & 330 FEL, Sec. 10-T8S-R33E

14. PERMIT NO. API #30-005-20925

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4367.6' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM 31211

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Sun UW Federal

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Chaveroo SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit H, Sec. 10-T8S-R33E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Ran tubing, packer, SWD <input checked="" 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.)*

9-24-86. Ran 124 joints 2-3/8" plastic coated J-55 tubing and 4-1/2" S. L. nickel plated packer set 4026'. Set 12000# on packer. Tested casing 425 psi for 30 minutes.

9-25-86. Hooked up wellhead, flow line. Began injecting water 3:00 PM 9-25-86.

Approved NMOCD Case 8883, Order No. R-8271, 8-8-86.



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

SIGNED Janita Drollett TITLE Production Supervisor DATE 9-26-86

(This space for Federal or State office use)

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE
OCT 8 1986
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side