

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

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 Form 9-331-C for such proposals.)

1. oil well gas well other
2. NAME OF OPERATOR
Yates Petroleum Corporation
3. ADDRESS OF OPERATOR
207 South 4th St., Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1650 FNL & 330 FEL, Sec. 1-8S-31E
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | | | | |
|--------------------------|-------------------------------------|-----------------------|-------------------------------------|
| REQUEST FOR APPROVAL TO: | | SUBSEQUENT REPORT OF: | |
| TEST WATER SHUT-OFF | <input type="checkbox"/> | | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | | <input checked="" type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input type="checkbox"/> |
| (other) | Production Casing, Perforate, Treat | | |

5. LEASE
NM 0558018

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Union SI Federal

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
Undes. Tomahawk SA

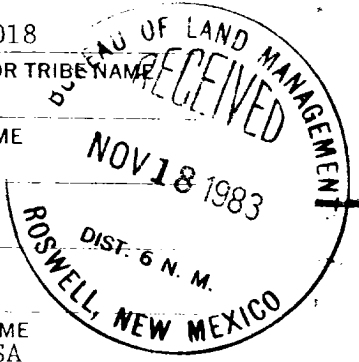
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit H, Sec. 1-T8S-R31E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4414.7' GR



(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

TD 4300'. Ran 107 jts of 4-1/2" 9.5# J-55 ST&C casing set 4300'. 1-regular guide shoe set 4300'. Super Seal float set 4260'. Cemented w/325 sacks Class "C", .5% CF-2, 2% KCL. Compressive strength of cement - 950 psi in 12 hours. PD 11:00 AM 10-4-83. Bumped plug to 1000 psi, held for 30 minutes, released pressure and float held okay. WOC 18 hours. WIH and perforated 4082-4117 1/2' w/19 .42" holes as follows: 4082, 83 1/2, 86, 87, 89, 90, 91, 92, 93, 94, 4100, 03, 04, 06, 07, 10, 11 1/2, 16 and 17 1/2'. Acidized perforations 4082-4117 1/2' w/3000 gal 20% DS-30 acid. WBIH and perforated 4014-4060 1/2' w/20 .42" holes as follows: 4014, 16 1/2, 18, 19, 20, 21 1/2, 23, 24, 26 1/2, 29, 31, 33, 36, 38, 40, 42, 44, 45 1/2, 58 and 60 1/2'. Acidized perforations 4014-4060 1/2' w/3000 gal 20% DS-30 acid and 30 ball sealers. Swabbed back load. Hung well on pump.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED David R. Glass TITLE Production Supervisor DATE 11-15-83

ACCEPTED FOR RECORD
(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS TITLE _____ DATE _____
CONDITIONS OF APPROVAL DEC 12 1983

ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED
DEC 16 1983
HOBBS OFFICE

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DEC 16 1983
D.C.D.
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