

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other Instructions
verse side)

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

45F

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
Bill Taylor

3. ADDRESS OF OPERATOR
1106 N. Country Club, Carlsbad, NM 88220

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
2970' FSL & 990' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3250' GL

5. LEASE DESIGNATION AND SERIAL NO
NM01119

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Welch-Yates C Fed.

9. WELL NO.
#3

10. FIELD AND POOL, OR WILDCAT
Cedar Hills Yates

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
5-T21S-R27E, NMPM

12. COUNTY OR PARISH
EDDY

13. STATE
NM

RECEIVED

O. C. D.
ADT

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 type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Test Casing: TA	<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.)*

12/29/92: 5 1/2" Casing was tested to 450#s, 2:10 to 2:25 p.m.; pressure drop was five lbs. during test: test successful.
Increased pressure to 500#s and observed pressure holding;
Test witnessed by BLM's Mr. Don Early.

RECEIVED
JAN 6 10 09 AM '93
CARLSBAD AREA OFFICE

APPROVED FOR 12 MONTH PERIOD

ENDING 01-01-94

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

SIGNED Bill Taylor TITLE Operator DATE 1/3/93

(This space for Federal or State agency use)

APPROVED BY David H. Gray TITLE DATE 1-14-93
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side