

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

copy to SF

Form approved
Budget Bureau No. 42 001

5. LEASE DESIGNATION AND SERIAL NO.

LC 063567

6. IF INDIAN, ALLOTTEE OR TRIBE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Yates Federal

9. WELL NO.

8

10. FIELD AND POOL, OR VESIC

McMillan Seven Rivers Queen

11. SEC. T., E., M., OR BLK. AND
SURVEY OR AREA

Sec. 5, T-20S, R-27E

1.

OIL WELL ☐ GAS WELL ☐ OTHER WATER INJECTED WELL

2. NAME OF OPERATOR

Harvey E. Yates Company, INC. ✓

3. ADDRESS OF OPERATOR

Suite 1000, Security National Bank Bldg., Roswell, N.M. 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

330 FSL & 330 FWL

RECEIVED

FEB 8 1977

14. PERMIT NO.

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

3376 GR

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT

REPAIR WELL

CHANGE PLANS

(Other)

(Other) TEMPORARY ABANDON

X

(NOTE: Report results of multiple completion or 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 start of 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.) *

As per your request, we are filing this form# 9-331. This well is temporarily abandoned.

In the event the well is put back on active status, we will so advise.

RECEIVED

FEB 03 1977

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *S. E. Czajinski*

TITLE Accountant

DATE 2-2-77

(This space for Federal or State office use)

APPROVED BY *for S. J. Lam*

TITLE ACTING DISTRICT ENGINEER

DATE FEB 8 1977

CONDITIONS OF APPROVAL, IF ANY:

1. The following information is for your information only.

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4. The following information is for your information only.

5. The following information is for your information only.

6. The following information is for your information only.