

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS. COMMISSION
SUBMIT IN TRIPLI
Duplicate Submissions
(one side)
Artesia, NM 88210

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

c/sf

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P&A	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Yates Petroleum Corporation	8. FARM OR LEASE NAME North Sturgeon PR Federal
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface 330 FNL & 1650 FEL, Sec. 4-T7S-R26E	10. FIELD AND POOL, OR WILDCAT Linda SA
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit B, Sec. 4-7S-26E
15. ELEVATIONS (Show whether on RT, GR, or ARTESIA, OFFICE) 3657.2' GR	12. COUNTY OR PARISH Chaves
	13. STATE NM

RECEIVED BY
FEB -9 1987
O. C. D.

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)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

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.) *

Plugged and abandoned well as follows:

6-27-85. Laid down rods and pump. Laid down 2-3/8" tubing. Dumped 3-1/2 yards Ready-mix down casing (capacity was 3.7 yards). Installed dry hole marker.

Note: Location corrected to show well 1650 FEL.

Post #D-2
8-23-85
P4A

18. I hereby certify that the foregoing is true and correct
SIGNED Peter D. Chester TITLE Production Supervisor DATE 6-28-85
(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

Approved as to plugging of the well bore.
Liability under bond is retained until
surface restoration is completed.

*See Instructions on Reverse Side

APPROVED
PETER D. CHESTER

FEB 4 1987

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA