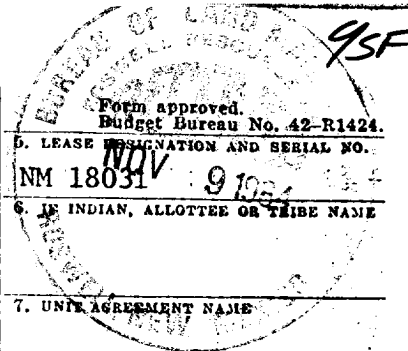


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM OIL CONS. COMMISSION
SUBMIT IN TRIPPLICATE
Artesia, NM 88210



RECEIVED BY

JAN 29 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. O. C. D.
ARTESIA, NM OFFICE WELL OTHER

2. NAME OF OPERATOR
Yates Petroleum Corporation

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

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

1980 FNL & 1980 FEL, Sec. 19-T8S-R26E

14. PERMIT NO.

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

3662.3' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM 18031

6. IS INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Huckabay TJ Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Pecos Slope Abo

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

Unit G, Sec. 19-8S-26E

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:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Name Correction

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Change name from: Huckabay TJ Federal
to: Huckaby TJ Federal

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

SIGNED P. W. Chester

TITLE Production Supervisor

DATE 11-6-84

(This space for Federal or State Approval)
APPROVED
(Orig. Sgd.) PETER W. CHESTER

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JAN 25 1985

See Instructions on Reverse Side