

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

Form approved.  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.  
NM 2359

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Sorenson IB Federal

9. WELL NO.  
2

10. FIELD AND POOL, OR WILDCAT  
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Unit D, Sec. 6-T7S-R26E

12. COUNTY OR PARISH  
Chaves

13. STATE  
NM

**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  
Yates Petroleum Corporation

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
1070 FNL & 860 FWL, Sec. 6-7S-26E

APR 04 1983

O. C. D.  
ARTESIA OFFICE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3642.6' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
Other) <u>Production Casing, Perforate</u>	<input checked="" 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.)\*

TD 4200'. Ran 104 jts of 4-1/2" 9.5# J-55 ST&C casing set 4190'. 1-regular guide shoe set 4190'. Float collar set 4150'. Cemented w/375 sacks 50/50 Poz, .6% D-19, .3% D-31 and 4#/sack KCL. Compressive strength of cement - 1050 psi in 12 hours. PD 5:30 AM 3-19-83. Bumped plug to 1250 psi, released pressure and float held okay. WOC 18 hours. Ran 1500' of 1". Cemented w/325 Howco Lite. WIH and perforated 3604-3847' w/29 .40" holes as follows: 3604, 05, 06, 07, 13, 14, 15, 3630, 31, 35, 36, 38, 39, 40, 94, 95, 96, 99, 3700, 04, 05, 29, 30, 3842, 43, 44, 45, 46 and 47'. WIH w/RBP, packer and tubing. Acidized perforations w/3250 g. 7 1/2% MOD 101 acid in 3 stages as follows: Stage I: 3842-47' w/750 g. 7 1/2% MOD 101 acid and 4 ball sealers. Stage II: 3694-3730' w/1000 g. 7 1/2% MOD 101 acid and 8 ball sealers. Stage III: 3604-3640' w/1500 g. 7 1/2% MOD 101 acid and 12 ball sealers. Pull tubing, packer and RBP. Frac'd perforations (via casing) w/60000 g. gelled 2% KCL, 120000# 20/40 sand and 1000 g. 7 1/2% HCL acid.

**RECEIVED**

MAR 30 1983

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

SIGNED David R. Glass TITLE Production Supervisor

DATE 3-28-83

(This space for Federal or State Office Use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS TITLE  DATE

MINERALS MANAGEMENT SERVICE  
ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side