

NEW OIL CO. COMMISSION

Drawer DD

ARTESIA, NEW MEXICO

**DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

Form Approved.
Budget Bureau No. 42-R1424

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug wells in different reservoir. Use Form 9-331-C for such proposals.)

RECEIVED

1. oil ☐ well gas ☒ well other ☐ **APR 19 1983**
2. NAME OF OPERATOR
Yates Petroleum Corp. ✓ O.C.D.
3. ADDRESS OF OPERATOR
207 S. 4th, Artesia, New Mexico **ARTESIA, OFFICE**
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL and 660' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|----------------------------------------------------------|--------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <input type="checkbox"/> | <input type="checkbox"/> |

5. LEASE
NM-2351
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Federal "HY"
9. WELL NO.
7
10. FIELD OR WILDCAT NAME
Pecos Slope Abo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 34-T7S-R25E
12. COUNTY OR PARISH 13. STATE
Chaves NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3631.0' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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 casing program from: 14 3/4" hole-10 3/4" csg-40.5# @800'
to: 17 1/2" hole-13 3/8" csg-32# @800'

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Subsurface Safety Valve: Manu. and Type

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED Nehora L. Y. Williams TITLE Regulatory Secretary DATE 4/15/83

APPROVED

(ORIG. SGD.) DAVID R. GLASS (This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: TITLE DATE

APR 15 1983

For James A. Williams
ACTING DISTRICT MANAGER

*See Instructions on Reverse Side