

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ 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. See space 17 below.)
AT SURFACE: 660 FNL & 660 FWL, Sec. 6-8S-26E
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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 checked="" type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input 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) Production Casing, Perforate, Treat

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.)*

ID 4450'. Ran 111 joints of 4-1/2" 9.5# J-55 casing set at 4449'. 1-regular guide
sleeve set at 4449'. Float collar set at 4409'. Cemented w/500 sacks 50/50 Poz, .6%
CF-9, .3% TF-4, .3% AF-11 and 3% KCL. Compressive strength of cement - 1050 psi in
12 hours. PD 5:45 PM 4-5-83. Bumped plug to 1000 psi, released pressure and float
held okay. WOC 18 hours. Ran 1500' of 1". Cemented w/300 sacks Pacesetter Lite.
WIH and perforated 3938-44' w/12 .42" holes as follows: 3938-44' (12 holes - 2 SPF).
RIH w/packer and RBP on tubing. Acidized perforations 3938-44' w/1000 gallons 7 1/2%
Spearhead acid and 6 balls. TOOH w/tools. Sand frac perfs 3938-44' (via casing)
w/20000 gallons gelled KCL water, 30000# 20/40 sand.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED David R. Glass TITLE Production Supervisor DATE 4-18-83

ACCEPTED FOR RECORD

(This space for Federal or State office use)

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

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 21 1983

ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

5. LEASE

NM 19218

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Peek WU Federal

9. WELL NO.

1

APR 25 1983

O. C. D.

ARTESIA, OFFICE

10. FIELD OR WILDCAT NAME

Und. Pecos Slope Abo

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

Unit D, Sec. 6-T8S-R26E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3553.9' GR

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