Form 9-331 Dec. 1973

Artesia, NM 88210

5. LEASE

Form Approved. Budget Bureau No. 42-R1424

UNITE	D S	TATE	S A
DEPARTMENT	OF	THE	INTERIOR
CEOLOGIA	CAL	CHD	VEV

NM 36653

DEPARTMENT OF THE INTERIOR	Mr. 2002.2		
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY NOTICES AND REPORTSESSIVE PLES (Do not use this form for proposals to drill or to depen or plug back to a different reservoir. Use Form 9–331–C for such proposals.) SEP 08 1983	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME		
1. oil gas 🗔	Carol VI Federal Com		
well well other O. C. D.	9. WELL NO.		
2. NAME OF OPERATOR ARTESIA, OFFICE	1		
Yates Petroleum Corporation 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME		
207 South 4th St., Artesia, NM 88210	West Pecos Slope Abo 11. SEC., T., R., M., OR BLK. AND SURVEY OF		
 LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 	AREA Unit P, Sec. 24-T7S-R22E		
AT SURFACE: 660 FSL & 990 FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE Chaves NM		
	14. API NO.		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 4058' GR		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) Perforate, Treat TO DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state)	(NOTE: Report results of multiple completion of zone change on Form 9–330.)		
measured and true vertical depths for all markers and zones pertiner 3200'. WIH w/casing gun and perforated 2753-2763 3, 54, 56, 57' (4 holes); 2760-63' (6 holes, 2 s	prectionally drilled, give subsurface locations and it to this work.)* B' w/10 .42" holes as follows: BPF). Acidized perforations		
53-63' w/1000 gallons acid. Sand frac'd perforat led KCL water, 20 tons CO2, 40000# 20/40 sand.	ions 2753-63' w/20000 gallons		

Subsurface Safety Valve: Manu. and Typ	oe		Set @ Ft.
18. I hereby certify that the foregoing is			
•	(This space for Federal or State off	ice use)	
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE	ACCEPTED FOR RECORD
			010

*See Instructions on Reverse Side