

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 ☐ well gas ☒ well other ☐

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

207 S. 4th, Artesia, New Mexico

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FSL and 660' FWL

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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☒

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

5. LEASE

NM-17202

6. IF INDIAN, ALLOTTEE OR TRIB. NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Short "RM" Federal

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

Pecos Slope Abo

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

Sec. 27-T7S-R25E

12. COUNTY OR PARISH 13. STATE

Chaves NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3596.1' 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 surface casing depth from: 1000'

to: 850'

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

Debra L. Wilburn

TITLE

Regulatory
Secretary

DATE

10-31-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

*See Instructions on Reverse Side

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