NM OIL CONS. COMMISSION Form Approved. Dec. 1973 UNITED STATES Drawer DD Budget Bureau No. 42-R1424 5. LEASE Artesia, NM 88210 DEPARTMENT OF THE INTERIOR NM 2351 **GEOLOGICAL SURVEY** 6. IF INDIAN, ALLOTTEE OR TRIBE NAME RECEIVED BY 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WE (Do not use this form for proposals to drill or to deepen or plug back reservoir. Use Form 9–331–C for such proposals.) APR 05 1984 8. FARM OR LEASE NAME Federal HY gas well X well other 0. C. D. 9. WELL NO. 2. NAME OF OPERATOR
Yates Petroleum Corporation 11 ARTESIA, OFFICE 10. FIELD OR WILDCAT NAME Pecos Slope Abo 3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210 11. SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 ARFA Unit A, Sec. 33-T7S-R25E AT SURFACE660 FNL & 660 FEL, Sec. 33-7S-25E 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: Chaves NM AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF. KDB. AND WD) 3592.1' GR REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF X FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) 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.)* Spudded 17-1/2" hole 9:00 PM 2-27-84. Ran 17 jts of 13-3/8" 45# J-55 ST&C casing set 539'. 1-Texas Pattern notched guide shoe set 539'. Insert float set 510'. Cemented w/350 sacks Pacesetter Lite with 2% CaCl2. Tailed in w/200 sacks Class "C" 2% CaC12. PD 4:15 PM 2-28-84. Bumped plug to 1000 psi, released pressure and float held okay. Cement circulated 50 sacks. WOC. Drilled out 4:15 AM 2-29-84. WOC 12 hours. Nippled up and tested to 1000 psi for 30 minutes, OK. Reduced hole to 12-1/4". Drilled plug and resumed drilling. Subsurface Safety Valve: Manu. and Type ____ 18. I hereby certify that the foregoing is true and correct Production Supervisor SIGNED - dlill TITLE DATE

*See Instructions on Reverse Side

(This space for Federal or State office use)

DATE

PETER W. CHESTER

PPROVAL, IF

APPROVED BY

CONDITIONS OF