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UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

NM OIL CONS. COMMISSION
Artesia, NM 88210
Drawer DD

OSUNDRY NOTICES AND REPORTS ON WELLS

ARTESIA, NM
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 ☐ P&A

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 FSL & 660 FWL, Sec. 12-6S-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 ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐(other) ☐

5. LEASE

NM 20344

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Cramer ZD Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Pecos Slope Abo

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

Unit M, Sec. 12-~~T~~S-R26E

12. COUNTY OR PARISH

Chaves

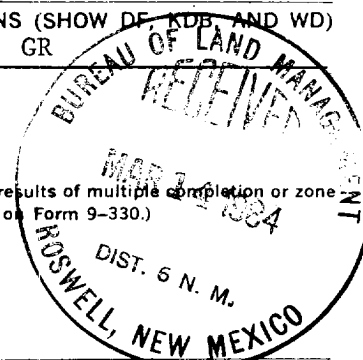
13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DE KDB, AND WD)
3811' GR

(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.)*

Well plugged as follows:

Plug #1: Set 4086.38' w/35 sx Class "C" 2% CaCl₂. PD 3:15 PM 3-10-84. WOC 1 hour. Tagged plug at 3977'.Plug #2: Set 1995.99' w/35 sx Class "C" 2% CaCl₂. PD 5:30 PM 3-10-84.Plug #3: Set 958.84' w/35 sx Class "C" 2% CaCl₂. PD 6:30 PM 3-10-84. WOC 1 hour. Tagged plug at 832'.Plug #4: Set 60.56' w/35 sx Class "C" 2% CaCl₂. PD 8:15 PM 3-10-84. Circulated 5 sacks to pit.Post ID-2
5-25-84
P&A

Prep to set dry hole marker and clean location.

Verbal permission for plugging given by Peter Chester, BLM, Roswell, 3-10-84.

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

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

SIGNED Peter Chester TITLE Supervisor DATE 3-13-84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

DATE

APPROVED
PETER W. CHESTER

MAY 3 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side



Vertical line of text or a separator running down the page.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

AM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

LEASE

NM 20344

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 ☐ P&A
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 FSL & 660 FWL, Sec. 12-6S-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 | ☐ | | ☐ |
| FRACTURE TREAT | ☐ | | ☐ |
| SHOOT OR ACIDIZE | ☐ | | ☐ |
| REPAIR WELL | ☐ | | ☐ |
| PULL OR ALTER CASING | ☐ | | ☐ |
| MULTIPLE COMPLETE | ☐ | | ☐ |
| CHANGE ZONES | ☐ | | ☐ |
| ABANDON* | ☒ | | ☐ |
| (other) | | | |

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Cramer ZD Federal

9. WELL NO. 1

10. FIELD OR WILDCAT NAME
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit M, Sec. 12-T6S-R26E

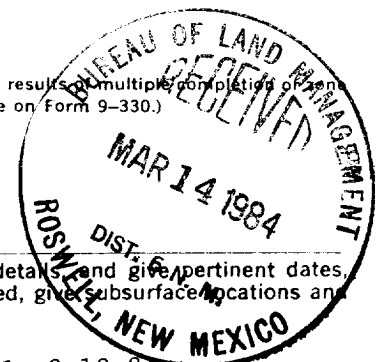
12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3811' GR

(NOTE: Report results of multiple completions or 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.)*

Verbal permission obtained from Peter Chester, BLM, Roswell, 3-10-84 to plug and abandon well as follows:

- Plug #1: Set 4069' w/35 sx cement and tag.
Plug #2: Set 2001' w/35 sx cement.
Plug #3: Set 900' across shoe w/35 sx cement and tag.
Plug #4: Set 50' to surface plug w/35 sx cement.

Install dry hole marker. Surface will be restored in accordance with BLM requirements.

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

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

SIGNED Peter W. Chester TITLE Supervisor DATE 3-13-84

APPROVED

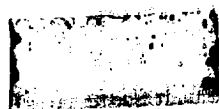
(This space for Federal or State office use)

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 18 1984



See Instructions on Reverse Side

Post ID-2
5-25-84
P+H

11

12

13

14

15

16

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 ☐ P&A

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 FSL & 660 FWL, Sec. 12-6S-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	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☒	☐
(other)		

5. LEASE
NM 20344

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Cramer ZD Federal

9. WELL NO. 1

10. FIELD OR WILDCAT NAME
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit M, Sec. 12-T6S-R26E

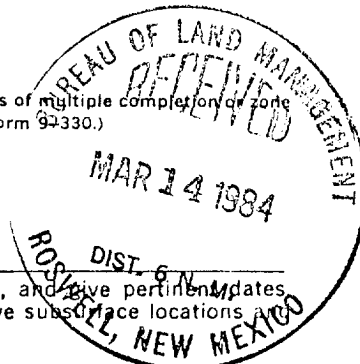
12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3811' GR

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



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Plug #3: Set 900' across shoe w/35 sx cement and tag.
Plug #4: Set 50' to surface plug w/35 sx cement.

Install dry hole marker. Surface will be restored in accordance with BLM requirements.

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

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

SIGNED Peter W. Chester TITLE Production Supervisor DATE 3-13-84

APPROVED

(This space for Federal or State office use)

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 18 1984

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DEY ☒	Other ☐	5. LEASE DESIGNATION AND SERIAL NO.			
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR		Yates Petroleum Corporation ✓				7. UNIT AGREEMENT NAME			
3. ADDRESS OF OPERATOR		207 South 4th St., Artesia, NM 88210				8. FARM OR LEASE NAME			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 660 FSL & 660 FWL, Sec. 12-T6S-R26E				9. WELL NO.			
At top prod. interval reported below						10. FIELD AND POOL, OR WILDCAT			
At total depth						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA			
14. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH		13. STATE			
				Chaves		NM			
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, BT, GR, ETC.)*		19. ELEV. CASINGHEAD	
2-28-84		3-9-84		-		3811' GR			
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS	
4550'		-				→		0-4550'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		25. WAS DIRECTIONAL SURVEY MADE							
Dry		No							
26. TYPE ELECTRIC AND OTHER LOGS RUN		27. WAS WELL CORED							
CNL/FDC; DLL		No							
28. CASING RECORD (Report all strings set in well)									
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD	
20"				40'		26"			
10-3/4"		40.5#		900'		14-3/4"		650	
29. LINER RECORD									
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)	
30. TUBING RECORD									
SIZE		DEPTH SET (MD)		PACKER SET					
31. PERFORATION RECORD (Interval, size and number)					32. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
					DEPTH INTERVAL (MD)				
					AMOUNT AND KIND OF MATERIAL USED				
33. PRODUCTION									
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.	
								GAS—MCF.	
								WATER—BBL.	
								GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.	
								WATER—BBL.	
								OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY				
					PETER W. CHESTER				
35. LIST OF ATTACHMENTS					APR 9 1984				
Deviation Survey									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records									
SIGNED		TITLE				DATE			
[Signature]		Production Supervisor				3-13-84			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22 and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				San Andres Glorieta Fullerton Abo	833 1984 3385 4069	

