

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
Artesia, NM 88210

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ 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 and in accordance with State requirements.  
See also space 17 below.)  
At surface

RECEIVED BY  
MAR 29 1985  
O. C. D.  
ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.  
NM 23516

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Lewis ABN Federal

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
Und. Pecos Slope Abo

11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA  
Unit J, Sec. 21-T8S-R23E

12. COUNTY OR PARISH  
Chaves

13. STATE  
NM

1980 FSL & 1593 FEL, Sec. 21-T8S-R23E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3982' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Production Casing, Perforate <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.) \*

2-14-85. TD 3500'. Ran 84 joints 4-1/2" 11.6# K-55 casing set 3500'. 1-guide shoe set 3500'. Float collar set 3459'. Cemented w/350 sx Class "C" w/5#/sx salt, .3% Halad-4 and .2% CFR-2. Compressive strength of cement - 750 psi in 12 hrs. PD 12:15 PM 2-14-85. Bumped plug to 1500 psi, released pressure and float held okay. WOC 18 hours. WOCU 25 days.

3-19-85. Ran 1500' of 1". Cemented w/300 sx Pacesetter Lite. Circulated 10 sacks to pit.

3-20-85. WIH and perforated 2954-3067' w/16 .42" holes as follows: 2954, 55, 56, 57, 58, 3051, 52, 53, 54, 55, 62, 63, 64, 65, 66 and 67'. Acidized perforations with 2000 gallons 7 1/2% NEFE acid and ball sealers. Frac'd (via 4-1/2" casing) perforations 2954-3067' w/40000 gals gelled 2% KCL water and 80000# 20/40 sand.

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

SIGNED Peter W. Chester TITLE Production Supervisor DATE 3-22-85  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD  
PETER W. CHESTER  
DATE  
MAR 27 1985  
BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side