

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE

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

015A

NM 25866

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.)

AUG 14 1985

O. C. D.
ARTESIA, OFFICE

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 any State requirements.
See also space 17 below.)
At surface

660' FNL & 660' FWL, Sec. 22-T6S-R26E

14. PERMIT NO.

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

3691.1' GR

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Buder ACN Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undes. Pecos Slope Abo

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

Unit D, Dec. 22-6S-26E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐
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☐

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

REPAIR WELL

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Spud well

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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(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.)*

8-1-85. Spudded 10" hole at 11:15 PM 7-31-85. Notified Chuck Flaherty with BLM. Made 5'.

8-2-85. Drilling 12'. Made 7'.

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

SIGNED

TITLE Production Supervisor

DATE 8-2-85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE

AUG 9 1985

BUREAU OF LAND MANAGEMENT
AROSWELL RESOURCE AREA

*See Instructions on Reverse Side