

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OH Cons Mission
Artesia, NM 88210

Form approved
Bureau of Land Management
Artesia, NM 88210
LEASE DESIGNATION AND SERIAL

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. NAME OF OPERATOR
Yates Petroleum Corporation ✓
2. ADDRESS OF OPERATOR
105 South 4th St., Artesia, NM 88210
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
660' FNL & 660' FW1
14. PERMIT NO.
API #30-005-62583
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3753.3' GR

4. UNIT AGREEMENT NAME
5. FARM OR LEASE NAME
Hahn NH Federal Com
6. WELL NO.
7. FIELD AND POOL OR WILDCAT
Pecos Slope Abo
8. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit D, Sec. 31-T7S-R25E
9. COUNTY OR PARISH
Chaves
10. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETION ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☒ X
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) ☐

(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.)

Verbal permission obtained from Peter Chester, BLM, Roswell, NM, by Al Springer, YPC, 2:15 PM, 1-19-88, to plug well as follows:

Plug #1 - 3510-3410' w/35 sx cement
Plug #2 - 1386-1286' w/50 sx cement, tag plug.
Plug #3 - 50' Surface w/30 sx cement.

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

SIGNED Peter W. Chester TITLE Production Supervisor

DATE 1-21-88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
DATE FEB 4 1988
PETER W. CHESTER
BUREAU OF LAND MANAGEMENT
ROSOWELL RESOURCE AREA

*See instructions on Reverse Side

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