

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

ATE*

Form approved,
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 076576

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C.S. Kimes Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

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

Unit A-Sec. 28-15S-29E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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 & 659' FEL, Sec. 28-15S-29E

14. PERMIT NO.

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

3828' KB

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Convert from gas to oil well ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

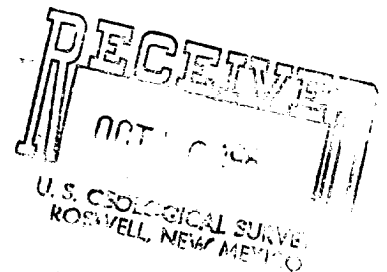
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Pressure of this well had declined to the point where it would not produce against pipeline pressure. In July 1980, cleanout operations were conducted to return the well to gas pipeline sales. Oil was circulated from the well during the operation, and it appears that oil is encroaching into this gas cap well. We propose to install pumping equipment and produce the well as an oil well.

RECEIVED

OCT 30 1980



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

SIGNED

Albert R. Hall

TITLE

Engineer

DATE Oct. 17, 1980

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

OCT 24 1980

DISTRICT SUPERVISOR

*See Instructions on Reverse Side