

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
CONS. COMMISSION

SUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)

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

C/SF

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P&A		RECEIVED BY  OCT -6 1986  O. C. D. ARTESIA OFFICE	5. LEASE DESIGNATION AND SERIAL NO. LC 029437	
2. NAME OF OPERATOR Yates Petroleum Corporation			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 105 South 4th St., Artesia, NM 88210			7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 810' FNL & 1980' FWL, Sec. 29-T16S-R31E			8. FARM OR LEASE NAME Grier	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)		9. WELL NO. 2
				10. FIELD AND POOL, OR WILDCAT Square Lake Grayburg-SA
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit C, Sec. 29-T16S-R31E
				12. COUNTY OR PARISH Eddy
				13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input 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.) \*

Propose to plug well as follows:

- 1) Spot sufficient cement across perforations 3232-3434' to tie back 50' into production casing above liner top at 3064'. Tag plug.
- 2) Perforate at 1600' (50' below Base of Salt), squeeze with 50 sx cement and leave 100' plug in casing. Tag plug.
- 3) Perforate at 565' (50' above Top of Salt), squeeze with sufficient cement to circulate and leave 100' plug in casing. Tag plug.
- 4) Set ~~50~~ surface plug and install regulation abandonment marker.

Note: 1) NOTIFY BLM, CARLSBAD, NM, 24 HOURS PRIOR TO BEGINNING WORK.  
2) Use 10#/gal mud-laden fluid between plugs.

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

SIGNED Juanita Doodler

TITLE Production Supervisor

DATE 10-1-86

(This space for Federal or State office use)

APPROVED BY Orig: Sgd. Charles S.  
CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

10-3-86

\*See Instructions on Reverse Side