

# Oil Cons. Commission

Draper DD

Form 9-331  
(May 1963)

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

### 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>RECEIVED BY</b>   <b>APR 7 1986</b>   <b>O. C. D.</b>  <b>ARTESIA OFFICE</b> </div>	5. LEASE DESIGNATION AND SERIAL NO.  LC-060723
2. NAME OF OPERATOR  Yates Petroleum Corporation			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR  207 S. 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  1980' FSL & 660' FWL			8. FARM OR LEASE NAME  Texas Trading "A"
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)	9. WELL NO.  3
			10. FIELD AND POOL, OR WILDCAT  Square Lake G-SA
			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  Sec. 29-T16s-R31e
			12. COUNTY OR PARISH   13. STATE  Eddy   NM

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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Change of operator</u> <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.)\*

Change of operator from: Newmont Oil Company  
PO Box 1305  
Artesia, NM 88210

to: Yates Petroleum Corporation  
207 S. 4th St.  
Artesia, NM 88210

ACCEPTED FOR RECORD

*SWD*  
APR 2 1986

CARISBAD, NEW MEXICO

RECEIVED  
MAR 8 1 16 PM '84  
BUDGET BUREAU  
ROSTON, CONNECTICUT

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

SIGNED Jerri B. Glegghorn

TITLE Production Clerk

DATE 3/1/84

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side