Form 9-331
(May 1963)

N. M. O. C. C. COPY Copy to

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM 020711

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐ GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Yates Petroleum Corporation

8. FARM OR LEASE NAME
Federal "U"

3. ADDRESS OF OPERATOR
207 S. 4th, Artesia, New Mexico

9. WELL NO.
1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FNL & 1980' FEL of Sec. 9, T-17-S, R-24-E "K" NE/4, SW/4

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
9 17S 24E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3773' GR

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) Spud date & casing test	☒
(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.)*

Chaves Drilling Company commenced drilling operations at 10:00 A. M. 2-14-65 (Spud date). Set 360' of 48# 13 3/8" casing at 360'. Cemented w/300 sx. Incor mixed w/ 3% HA-5. Plug down at 3:30 A. M. 2-15-65. Cement circ. WOC 18 hours. Tested 13 3/8" casing w/1000# for 30 minutes. Tested OK.

RECEIVED
FEB 18 1965
O. C. C.
ARTESIA, OFFICE

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

SIGNED J. J. McDaniel TITLE Group Supervisor DATE 2-16-65

(This space for Federal or State office use)

APPROVED BY Rudolph C. Bain, I. TITLE ACTING DISTRICT ENGINEER DATE FEB 17 1965

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side