

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN 7
(Other Instru
verse side)LOCATE
S OR TOForm approved.
Budget Bureau No. 42-R1424.
D. LEASE DESIGNATION AND SERIAL NO.
NM 036191

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"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Yates Petroleum Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, New Mexico		8. FARM OR LEASE NAME Federales "BO"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW NW 990' FNL & 990' FWL of Sec. 23-17S-25E		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Eagle Creek S.A.	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3507' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23-17S-25E Unit D NMPM	
		12. COUNTY OR PARISH Eddy	
		13. STATE N.Mex.	

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) Ran 7" Surface Casing <input checked="" 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.)*

1-20-70 - TD 1153'. Ran 1153' of 7" 20# J-55 casing. 1 Baffle Collar plug at 1131'. Cemented with 300 sx of cement, 1 sx CaCl, 20 sx of Gilsonite and 100# celophane and 4 sx of gel. PD at 5:30 PM 1-20-70. Ran Temperature Survey and found top of cement at 720' from surface. Ran Kobe tubing and cemented with 475 sx of 4% CaCl. Cement circulated to surface. Cement in place at 10:30 AM. 1-21-70. WOC. Filled to surface with 75 sx of CaCl. WOC 6 hrs and drilled plug at 9:00 PM 1-21-70. Tested with 500# pressure for 30 min. and tested OK. Reduced hole to 6 1/4" and resumed drilling.

RECEIVED

JAN 27 1970

O. C. C.
ARTESIA, DFTRECEIVED
JAN 23 1970

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

SIGNED [Signature] TITLE Geologist DATE 1-26-70

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD PURPOSES
JAN 26 1970
Date ACTING [Signature] District Engineer

*See Instructions on Reverse Side