16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OB ALTER CASING WATER SHUT-OFF REPAIRING WELD	- 1 0. 42 -R1424. NORIAL NO.
OIL WELL X WELL OTHER OTHER SEP 21 1976 8. FARM OR LEASE NAME 2. NAME OF OPERATOR OTHER OTHER SEP 21 1976 8. FARM OR LEASE NAME 3. ADDRESS OF OPERATOR OTHER OTHER Pederal "BW" 9. WELL NO. 207 South 4th Street - Artesia, NM 88210 10. FIELD AND POOL, OR WELL NO. 2 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements." 9. WELL NO. 2 330' FSL & 1650' FEL of Sec. 22-17S-25E II. SEC. T. R. M., OR BEK. Subset of AREA 330' FSL & 1650' FEL of Sec. 22-17S-25E II. SEC. T. R. M., OR BEK. Subset of AREA 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR FARISH 13 3521 GR Eddy 13 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 NE	TRIBE NAME
2. MARE OF OFFERTOR Yates Petroleum Corporation Federal "BW" 3. ADDRESS OF OPERATOR B. G. G. 9. WELL NO. 207 South 4th Street - Artesia, NM 88210 9. WELL NO. 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements." 10. FIELD AND POOL, OR WILL State and the accordance with any State requirements." See also space 17 below.) At surface 10. FIELD AND POOL, OR WILL SUBJECT OF SEC. 22-17S-25E 330' FSL & 1650' FEL of Sec. 22-17S-25E Subserv or Akea 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3521 GR 12. COUNTY OR PARISH 13 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	
3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, NM 88210 2 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 10. FIELD AND POOL, OR WIELS (Report location clearly and in accordance with any State requirements.* See also space 17 below.) 14. FERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. country or parises 13 Eddy 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	
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL	I. STATE NM
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FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT X ALTERING CASIN SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDONMENT* REPAIR WELL CHANGE PLANS (Other) (Other) (Other) Completion or Recompletion Report and Log form.)	G

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.)*

Frac'd well thru perforations w/80000 gallons of gelled water, 180000# of sand, 130000# 20-40 and 50000# 100 mesh w/ball sealers.

The well had declined to $2\frac{1}{2}$ BOPD and after treatment well has increased in production to 7 BOPD.



18. I hereby certify that the foregoing is true and apprect SIGNED SIGNED	TITLE	Geol. Secty	DATE9-16-76
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	ACTING DISTRICT ENGINEER	DATE SEP 1 7 1976

*See Instructions on Reverse Side