

N. M. O. C. C. COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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Form approved.  
Budget Bureau No. 42-R-1424-13

**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.)

<p>1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR Yates Petroleum Corporation</p> <p>3. ADDRESS OF OPERATOR 207 South 4th Street- Artesia, New Mexico 88210</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FWL &amp; 330' FSL of Sec. 22-17S-25E</p> <p>14. PERMIT NO.</p> <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3532' GL</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. NMOB 1403-1</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Federal BW</p> <p>9. WELL NO. 3</p> <p>10. FIELD AND POOL, OR WILDCAT Und. Eagle Creek S.A.</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-17S-25E Unit M 14PM</p> <p>12. COUNTY OR PARISH Eddy</p> <p>13. STATE N.M.</p>
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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 type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

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

TD 1472' - 6-18-71. Ran a tapered string of production casing as follows:  
Ran 526' of 4½" 9.5# J-55, 932' of 5½" 14# J-55, 1-Swage and  
Float Collar, set at 1458' GL with 125 sxs cement Neat 2% CaCl.  
Cement circulated. Centralizers at 1418, 1321, 1242 & 1053'.  
PD 5:00 PM 6-19-71. WOC 24 hrs. NU and press. tested casing  
w/1000#. Held OK.  
Perforated by Perfojets Services as follows: 1313½, 1331, 1348½,  
1356, 1367, 1374, 1388½, 1397½, 1415½, 1425½, 1435, 1444½,  
1334, 1344, 1352½, 1378½, 1395, 1407½, 1429, 1449½.  
Sand Frac'd by Halliburton using 6500 gallons of 15% acid for  
breakdown, 40000# 20-40 sand and 80000 gallons of treated water.

RECEIVED

JUN 25 1971

O. C. C.

ARTESIA, OFFICE

RECEIVED

JUN 24 1971

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED <u>E. L. Lundy</u>	TITLE <u>Engineer</u>	DATE <u>6-24-71</u>
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(This space for Federal or State office use)

APPROVED BY _____	TITLE _____	DATE _____
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CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD PURPOSES  
JUN 24 1971  
Date  
ACTING District Engineer

\*See Instructions on Reverse Side