

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NMOCC COPY

SUBMIT IN TRIPlicate
(Other instructions
reverse side)

Copy to S. J.

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 3603	
2. NAME OF OPERATOR Yates Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 207 South Fourth Street - 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 660' FSL & 660' FEL of Section 32-17S-25E		8. FARM OR LEASE NAME Federal "GC" Com	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3588' GR		10. FIELD AND POOL, OR WILDCAT Eagle Creek Permo Penn	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 32-17S-25E Unit P NMPM	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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 checked="" type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Downhole commingle	<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

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

Production from Permo Penn perforations 6276-6600' has been marginal. We are shutting in the well today for bottom hole pressure to evaluate remaining reserves. We propose to commingle the Eagle Creek Permo Penn with the Eagle Creek Strawn and the Richard Knob Atoka-Morrow. Commingled production would be allocated on a formula based upon remaining reserves in each completion and will be presented to NMOCC for approval.

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

SIGNED

Eddie H. Lutz

TITLE Engineer

DATE 12-20-78

(This space for Federal or State office use)

APPROVED BY

Joe J. Lara

TITLE ACTING DISTRICT ENGINEER

DATE JAN 4 1979

CONDITIONS OF APPROVAL, IF ANY: