		NMOCC CO	PY.		00	Ru-to	- 50	
Form 9-331 (May 1963)		II ED STATES EIN F OF THE IN EOLOGICAL SURVI	TERIOR	SUBMIT IN TRU AT (Other instructio in source side)	re- 5. LEASE DE NM	m approved. dget Bureau No. SIGNATION IND N 2346	ERTAL NO.	
(Do not use thi	NDRY NOTIO	CES AND REPOR	TS ON	WELLS a different reservoir.	\	ALLOTTEE ON T	AINE NAME	
	······································				7. UNIT AGR	EEMENT NAME		
WELL WELL OTHER AUG 1						8. FARM OR LEASE NAME		
Yates Petroleum Corporation						Robinson HW Federal 9. WELL NO.		
3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, NM SSEDIO OFFICE								
 201 SOLULI 4 LI SCLECC Incoding in accordance with any State requirements.* See also space 17 below.) At surface 						10. FIELD AND POOL, OR WILLCAT Wildcat 11. SEC., T., R., M., OR BLK. AND		
1980' FSL & 1980' FWL of Sec. 25-165-24E						survey or ABEA Sec. 25-16S-24E Unit K NMPM		
14. PERMIT NO.		15. ELEVATIONS (Show wh	ether DF, RT, G	R, etc.)		OE PARISH 13.		
		3638'			Edd	I <u>Y</u>	NM	
16.	Check Ap	propriate Box To Indi	cate Natur	e of Notice, Report, o				
	NOTICE OF INTEN	TION TO:	_	SUBS	SEQUENT REPORT		[]	
TEST WATER SHUT	· · · · · · · · · · · · · · · · · · ·	ULL OR ALTER CASING	_	WATER SHUT-OFF FRACTURE TREATMENT	37	REPAIRING WELL ALTERING CASING		
FRACTURE TREAT		IULTIPLE COMPLETE		SHOOTING OR ACIDIZING	i,	ABANDON MENT*		
SHOOT OR ACIDIZE Repair well	[]	HANGE PLANS	_	(Other)	ults of multiple	completion on W		
				Completion or Reco ails, and give pertinent da and measured and true ve	pupletion Report	and Log torm.)		
acid w/ 1/4" ch WIH and w/10 .5 40# on shotsPOH w/g	ball seal oke 55# = set brid 0" shots. 1/4" chok un WIH w perforat reatment	ers. After s 98 MCFPD. ge plug in pa Treated w/2 e. WIH w/per /Baker packer ions w/1000 c	cker a 000 ga forati on 2-	cations w/100 g and cleaning t 6080' and per llons of 15% i ng gun and per 3/8" tubing a of 15% acid 1/4" choke w/	g up, we erforate DS-30 ac rforated nd set p . Well	d 4763-4 id. Clea 4812-48 acker at cleaned	797 aned u 55'w/1 4502! up	
18. I hereby certify t	hat the foregoing ;	S true and correct			ART	8-11-	 ירר	
SIGNED	1 -,	Encluso TIT	Ge	ol. Secty	DA'I	0-11-		
(This space for	eueral or State of							
D APPROVED BY CONDITIONS OF	APPROVAL, IF		LE		DA1	ге	, _, _, _,	
1- Jou	1/2.00	*** 1	A	Dovorco Sido				
ACTING DISTRICT E	NUMER	*See Ins	tructions or	n Reverse Side				

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