

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

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> P&A		<div style="border: 2px solid black; padding: 10px; transform: rotate(-5deg); display: inline-block;"> RECEIVED BY SEP 29 1986 O. C. D. ARTESIA OFFICE </div>		5. LEASE DESIGNATION AND SERIAL NO. NM-13417
2. NAME OF OPERATOR Yates Petroleum Corporation				6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 207 South 4th St., 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 2310' FSL & 330' FEL				8. FARM OR LEASE NAME Strange "PZ" Federal
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3880.6' GR		9. WELL NO. 1
				10. FIELD AND POOL, OR WILDCAT Und. Henshaw-Qn-Gbg.-SA
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit I, Sec. 11-T16S-R30
				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:		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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input 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.) *

Plugged and abandoned well as follows:

Plug #1 3220-2520' w/85 sacks Class "C" cement.
 Plug #2 1440-1220' w/100 sacks Class "C" cement. WOC 3 hrs & tagged at 1220'.
 Set CIBP at 475' w/35 sacks Class "C" cement on top. Pulled tubing and set top plug w/15 sacks at surface. Dry hole marker installed. Surface will be restored in accordance with USGS-BLM requirements. Verbal approval for this plugging given by Mr. George Stewart, USGS, Roswell 8-10-81.

RECEIVED
 AUG 24 1981

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED [Signature] TITLE Engineering Secretary DATE 8-20-81

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DATE 9.23.86
 CONDITIONS OF APPROVAL, IF ANY: