

RECEIVED BY **DEPARTMENT OF THE INTERIOR**
BUREAU OF LAND MANAGEMENT

FEB 15 1985
SUNDY 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.)

O. C. D.

OIL ARTESIA OFFICE

FEB 04 1985

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

207 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1650 FSL & 2310 FEL, Sec. 26-T16S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4131.5' GR

5. LEASE DESIGNATION AND SERIAL NO.

NM 38475

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hedgehog ABM Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat Reso

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Unit J, Sec. 26-16S-31E

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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Spud Well

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Spudded 26" hole at 1:25 PM 1-31-85. Set 40' of 20" conductor pipe.

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

SIGNED

TITLE: Production Supervisor

DATE: 2-1-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side