APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE		
(This space for Federal or State office use)	•			APR 21 1980	
SIGNED By Staries	TITLE Drilling	Supervisor	DATE	Dec. 11, 1978	
18. I hereby certify that the foregoing is true and correct		u.s. geologist Artesia, Nevi	MEVIOO		
			a Survey .		
		RECEIV DEC 181	278	90 V	
		RECEIV	ED	$-k_{i,k}$	
Witnessed by: James Brasfield &	Sonny White				
Tagged bottom with tubing - pumper hole - set 25 sx plug at 3156' - Set 25 sx plug at 3029' tagged pludled 5½" casing. Set 7" ret pt 7" at 610 & 1050'. Set ret at 90 on ret. Squeezed top perfs w/100 Ran tubing - set 15 sx plug in to	lost plug down ho ug at 2780'. Sho 2411 - squeezed 00', squeezed with 0 sxs displaced do	ole. Tagged at ot casing off a below ret w/10 n 50 sxs. Left own to 150' fro	3472'. t 2460'. 0 sxs. P 50' ceme m perfs.	erf nt	
November 14, 1978					
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state proposed work. If well is directionally drilled, give sul nent to this work.)	21 4 2 4 2 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4	in partinent dates inch	ding estimated	date of starting any	
REPAIR WELL CHANGE PLANS (Other)	(Other)	OTE: Report results of m	ultiple completi Report and Log	on on Well	
FRACTURE TREAT SHOOT OR ACIDIZE ABANDON*		G OR ACIDIZING	ALTERING ABANDON	MENT* X	
TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER S	HUT-OFF	REPAIRIN		
16. Check Appropriate Box to Notice of Intention to:	luaicase izainis oi izoii	ce, Report, or Other			
16. Check Appropriate Box To		e Report or Other		NM	
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			COUNTY OR PAR	ISH 13. STATE	
660 FNL & 1980 FEL			Unit B -//S Sec. 5-T185-R30E		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			10. FIELD AND POOL, OR WILDCAT Square Lake 11. SEC., T., R., M., OR BLK. AND SURVEY OR ABEA		
3. ADDRESS OF OPERATOR 207 So. 4th St., Artesia, NM 88210			3		
S. P. Yates			Evans P. Well No.		
OIL X GAS OTHER		8. F	ARM OR LEASE I	VAME	
Use "APPLICATION FOR PERMIT—	rn or plug back to a dineren" for such proposals.)		NIT AGREEMENT	NAME	
SUNDRY NOTICES AND REPORTS ON WELLS			6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
DEPARTMENT OF THE INTERIOR (OTHER INSTRUCTIONS OTHER INTERIOR (OTHER INTERIOR OTHER INTERIOR (OTHER INTERIOR OTHER INTERIOR (OTHER INTERIOR OTHER INTERIOR (OTHER INTERIOR OTHER INTERIOR OTHER INTERIOR OTHER (OTHER INTERIOR OTHER INTERIOR OTHER (OTHER INTERIOR			LC-065598		
Form SAECEIVED UNITED STATE		N TRIPL TE*		oved. reau No. 42-R1424.	
NMCC COPY		,			