

NM OIL CONS. COMMISSION  
Drawer DD  
Artesia, NM 88210

Form 9-331  
Dec. 1973

Form Approved.  
Budget Bureau No. 42-R1424

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐  
well well other

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

207 S. 4th St., Artesia, NM 88210 C. D.

4. LOCATION OF WELL (REPORT LOCATION ARTEZIA OFFICE See space 17 below.)

AT SURFACE: 330' FSL & 330' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON\* ☐

(other) Change of operator

5. LEASE

LC-058480

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

West Loco Hills G4S Ut Tr 10A

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Loco Hills Q. G. SA

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

Sec. 3-T18s-R29e

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

Change of operator from: Newmont Oil Company  
PO Box 1305  
Artesia, NM 88210

to: Yates Petroleum Corporation  
207 S. 4th St.  
Artesia, NM 88210

ACCEPTED FOR RECORD

APR 2 1986

CARISBAD, NEW MEXICO

RECEIVED  
MAR 8 1 02 PM '84  
DIPLOMA  
RECEIVED

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Jenni B. Gleghorn TITLE Prod. Clerk DATE 3/1/84

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: