

45F

UNITED STATES Artesia, NM 88210
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE	LC 067132
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME (Denton) Hover	
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 Unit 0, Sec. 20-T18S-R29E	
12. COUNTY OR PARISH	Eddy
13. STATE	NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD)	3458' DF

RECEIVED BY
NOV 23 1982
O. C. D.
ARTESIA, OFFICE

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 well gas well other P&A

2. NAME OF OPERATOR
Yates Drilling Co. *Agard Drilling Co. Denton Oil Co.*

3. ADDRESS OF OPERATOR
207 S. 4th St., Artesia, NM 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660 FSL & 1980 FEL
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	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) Replug well.	<input checked="" type="checkbox"/>	NMOCD Order No.	R-7012

(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.)*

Replugged well as follows: Cleaned out to 2585'. Set 100 sx Class "C" cement plug at 2470'. Tagged plug at 2062'. Set 75 sx Class "C" w/2% CaCl cement plug at 840'. Tagged plug at 600'. Set 75 sx Class "C" w/2% CaCl cement plug at 418'. Tagged plug at 286'. Set 35 sx surface plug. Installed dry hole marker. Work started 10-9-82. Work completed 10-12-82. Witnessed by Mr. Williams, OCD, Artesia. Witnessed by Mr. Cortez, MMS.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *Lynette Woodlett* TITLE Engineering Secty DATE 10-18-82

APPROVED (This space for Federal or State office use)

APPROVED BY *W. Chester* TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NOV 25 1983

*See Instructions on Reverse Side