

UNITED STATES Artesia, NM 88210  
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 ☐ well gas ☐ well other P&A ☐  
2. NAME OF OPERATOR  
Yates Drilling 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: 2970 FSL & 2970 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. NMOCD Order No. R-7012

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 2570' w/6-1/4" bit. Found top of old 8-5/8" casing at 220'. Set 100 sx Class "C" cement plug at 2415'. Tagged plug at 2125'. Set 60 sx Class "C" cement w/2% CaCl plug at 837'. Tagged plug at 706'. Set 100 sx Class "C" cement w/2% CaCl plug at 418'. Tagged plug at 210'. Set 15 sx surface plug. Installed dry hole marker.  
Work started October 5, 1982. Completed work October 8, 1982.  
Witnessed by Mr. Williams, OCD, Artesia  
Witnessed by Mr. Jim Ward, MMS, Artesia

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

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

SIGNED Peter W. Chasela TITLE Engineering Secty DATE 10-18-82

(This space for Federal or State office use)

APPROVED BY PETER W. CHASELA TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: