

UN. D STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Drawer DD

Artesia, NM 88210
(Other instructions
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

e/SF

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 "APPLICATION FOR PERMIT" for surface proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
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
1980 FNL & 990 FEL, Sec. 3-T18S-R29E
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3518' GL

5. LEASE DESIGNATION AND SERIAL NO.
LC 058480
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
West Loco Hills G4S Unit
8. FARM OR LEASE NAME
West Loco Hills G4S Unit
9. WELL NO.
Tract 10B-Well No. 7
10. FIELD AND POOL, OR WILDCAT
Loco Hills-Q-G-SA
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit H, Sec. 3-18S-29E
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

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Well well to production

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Propose to return well to production by setting pump jack and changing pump. Rods and tubing are in hole.
Well has been Temporarily Abandoned.

18. I hereby certify that the foregoing is true and correct
SIGNED Donita Doad TITLE Production Supervisor DATE 5-24-85
(This space for Federal or State office use)
APPROVED BY Don W. Ford TITLE APPROVING OFFICER DATE 6-3-85
CONDITIONS OF APPROVAL, IF ANY

*See Instructions on Reverse Side