

N. M. O. & C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN
(Other Instr. as on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

Copy to SF
5. LEASE DESIGNATION AND SERIAL NO.
LC 028990 (b)

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 such proposals.)

<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. NAME OF OPERATOR Yates Petroleum Corporation</p> <p>3. ADDRESS OF OPERATOR 207 So. 4th Street - Artesia, New Mexico 88210</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE 330' FSL & 2310' FWL of Sec. 24-18S-30E</p> <p>14. PERMIT NO.</p>	<p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Creek "AL"</p> <p>9. WELL NO. 5</p> <p>10. FIELD AND POOL, OR WILDCAT Shugart</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24-18S-30E NMPM</p> <p>12. COUNTY OR PARISH Eddy</p> <p>13. STATE N.MEX.</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3564' GR</p>	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) 5 1/2" Casing	(Other) <input checked="" type="checkbox"/>

(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.)*

- 12-14-69 - Ran 3422' of 5 1/2" 15.5# J-55 casing, 1-Float Shoe, 3 thd. lock on 1st 3 jts and 3 centralizers. Set at 3422' and cemented with 150 sx of Regular cement. PD 4:00 PM 12-14-69.
- 12-17-69 - Perforated the following interval with 37 - 1/2 1/4 bullets by Dresser Atlas and treated perfs as follows:
3292-3297'; 3308-3313 1/2'; 3355-3364'; and treated with 1500 gal acid, 50000# 20-40 sand and 1500 bbls of water.

RECEIVED

DEC 23 1969

ARTESIA, NEW MEXICO

DEC 22 1969

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

SIGNED [Signature] TITLE Agent DATE 12-22-69

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD PURPOSES

DEC 22 1969
Date

ACTING

District Engineer

*See Instructions on Reverse Side