

(May 1963)

DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

(Other instructions on reverse side)

COPY 3F  
Budget Form No. 42-R1424

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Dry</b>		5. LEASE DESIGNATION AND AERIAL NO. <b>NM 13731</b>
2. NAME OF OPERATOR <b>Yates Petroleum Corporation</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <b>207 South 4th Street - Artesia, NM 88210</b>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <b>At surface</b> <b>660' FSL &amp; 1980' FSL of Sec. 28-18S-27E</b>		8. FARM OR LEASE NAME <b>Federal GG</b>
14. PERMIT NO. <b>JAN 6 1977</b>		9. WELL NO. <b>1</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>3418' GR</b>		10. FIELD AND POOL, OR WILDCAT <b>Unesignated</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 28-18S-27E</b> <b>Unit I NMPM</b>
		12. COUNTY OR PARISH <b>Eddy</b>
		13. STATE <b>NM</b>

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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input 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.) \*

TD 1100' - MI well Servicing Unit and plugged well as follows: Pulled and layed down the 8-5/8" casing. Ran tubing to 1040' and filled hole with heavy mud-spotted Class "C" cement as follows:

35 sacks 1040-950'

35 sacks 400-300'

10 sacks at surface with dry hole marker.

Heavy mud placed between each plug.

The location will be cleaned, pits levelled and restored to as much the original status as possible. We will notify your office when the location is ready for inspection.

RECEIVED  
JUL - 1 1976  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED Christine Johnson TITLE Geol. Secty DATE 7-1-76

(This space for Federal or State office use)

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

\*See Instructions on Reverse Side