

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NMOCC COPY

SUBMIT IN TRIP
(Other instruction
reverse side)VTE*
re-Form approved,
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0440087

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back test different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Yates Petroleum Corporation		8. FARM OR LEASE NAME Federal "CX" Com.	
3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, NM 88210		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL & 660' FWL of Section 7-18S-25E		10. FIELD AND POOL, OR WILDCAT Undesignated	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3646' GR	
		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	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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 8417'; PBDT 7185'. WIH w/Strip Gun and Guiberson packer, set packer at 6985' and perforated as follows: 7037, 41, 43, 44½, 46, 60, 62, 63½, 66 and 70' w/10 .38" shots. Treated perforations w/2000 gallons 15% DS-30 W/XR-2 acid and nitrogen w/ball sealers. No shows.

WIH and set CIBP at 7010', dumped 2 bailers of cement on top of CIBP. Set packer at 6901' and perforated 6937-6952' w/15 .34" holes, treated perforations w/1500 gallons 15% DS-30 acid and ball sealers. Swabbed salt water.

Set CIBP at 6900' w/15' of cement on top of BP. WIH w/perforating gun and Guiberson Uni VI packer, set packer at 6590' & perforated 6626-6664' w/29 .34" holes. (6626-36 (2 spf 20 shots) 6655-6664' (1 spf 9 shots) Treated w/2000 gallons 15% DS-30 acid and ball sealers. Blew well down and ran swab found fluid at 3700'. Swabbing a show of gas and acid water. Retreated perforations w/10000 15% regular acid and 5000 gallons of CO-2. Swabbed back water.

TD 8417'; PBDT 6590'. WIH w/Blanking Plug in packer at 6590'. POH. WIH w/perforating gun and Guiberson packer on 2-3/8" tubing, set packer at 6462'. Perforated 6492-6496' w/16 .34" shots. Treated perforations w/1000g 15% DS-30 acid. Recovering gas and condensate.

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

SIGNED Christine Tomblum TITLE Geol. Secty DATE 11-2-77

(This space for Federal or State office use)

APPROVED BY Lee H. Lora TITLE ACTING DISTRICT ENGINEER DATE NOV 22 1977
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side