

NMOCC COPY

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Copy to SF  
Form approved.  
Budget Bureau 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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>		RECEIVED DEC 6 1977		5. LEASE DESIGNATION AND SERIAL NO. NM-14842	
2. NAME OF OPERATOR Harvey E. Yates Company				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1933, Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME Travis Bassett Birney		8. FARM OR LEASE NAME Travis Bassett - Birney	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL & 1980' FEL		9. WELL NO. 1		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3573.9' GL		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T-18S, R-29E	
				12. COUNTY OR PARISH Eddy	
				13. STATE N. M.	

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" 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.) \*

We will run 2900' of 8 5/8" Intermediate casing instead of 3500' as set out in the application to drill.

RECEIVED  
NOV 15 1977  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

*Harvey E. Yates*

TITLE

Vice President

DATE

11-14-77

(This space for Federal or State office use)

APPROVED BY

*Lee J. Lam*

TITLE

ACTING DISTRICT ENGINEER

DATE

DEC 5 - 1977

CONDITIONS OF APPROVAL, IF ANY: