

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA, Agreement Designation
2. Name of Operator Harvey E. Yates Company	8. Well Name and No. DEPCO FED. # 1
3. Address and Telephone No. P.O. Box 1993 , Roswell, NM 88202 1-505-623-6601	9. API Well No. 30-015-22751
4. Location of Well (Footage, Sec., T., R., M, or Survey Description) D, 330' FNL & 660' FWL SEC 19, T-18S, R-29E	10. Field and Pool, or Exploratory Area TRAVIS YATES
	11. County or Parish, State EDDY CO., NM

JUN 1998
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OCD - ARTESIA

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change in Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>CASING INTEGRITY TEST FOR TA STATUS.</u>	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. 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.)

CURRENT PERFS: 971-981' (OA)

6-10-98 SET 4 1/2" CIBP @ 950'

6-11-98 PRESSURE TEST CASING TO 540# FOR 30 MINS. LOST 20#/'S IN 30 MIN. HELD OK. SEE ATTACHED CHART.

REQUEST APPROVAL FOR TA STATUS.

CC: OCD II ARTESIA.

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

Signed Ray F. Nokes Title PROD. MGR./ ENG. Date 6/10/98

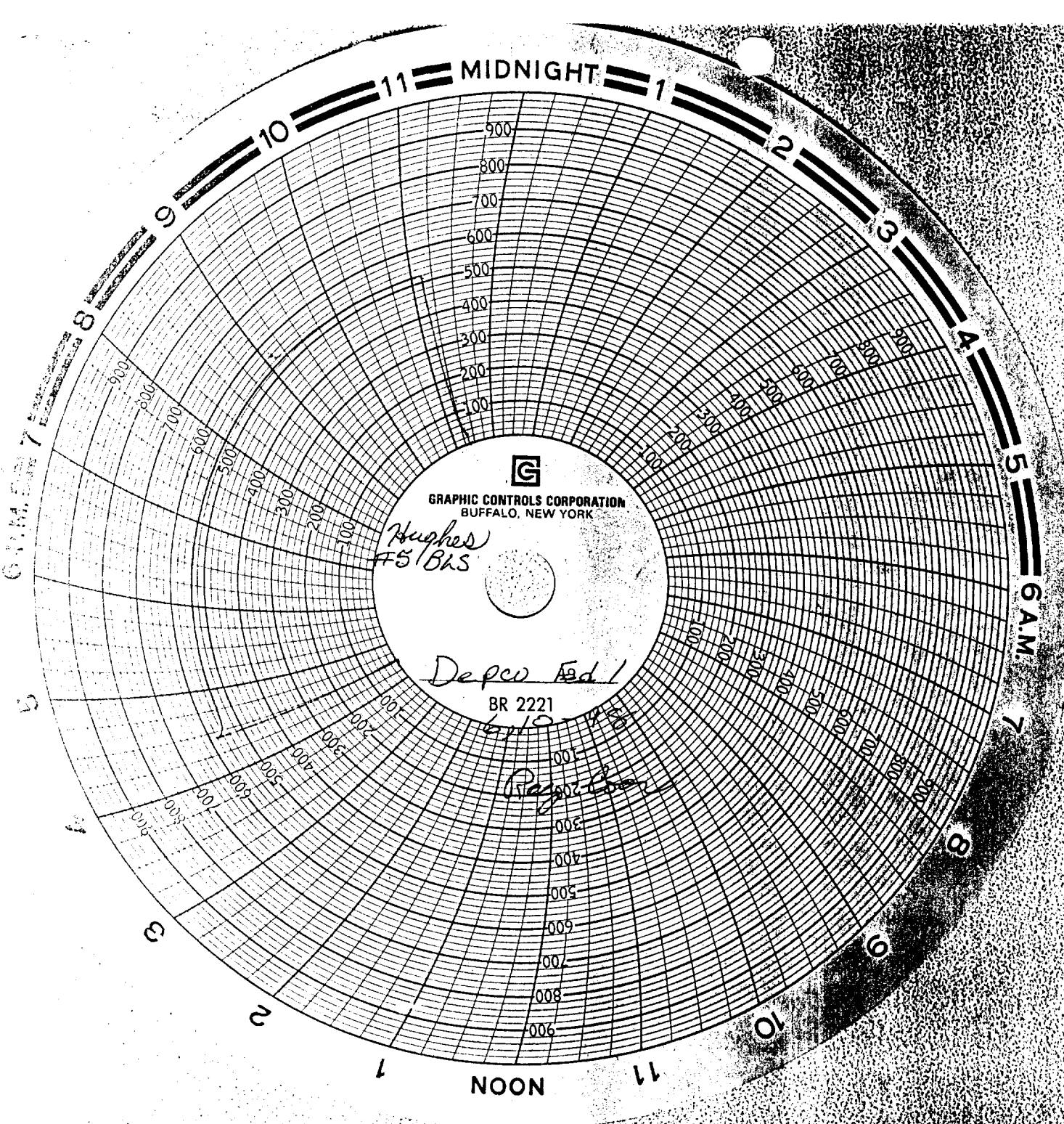
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____

This 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

* See Intruction on the Reverse Side



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6/10/53

Regulation