N.M.O.C.D. COPY

Form 9-331	UNITED STAT	rec	SUBMIT IN TRIPLICATI	Form ap		
(May 1963)	DEPARTMENT OF THE		(Other Instructions on	re- Buuget 1	Bureau No. 42-R1424. TION AND SERIAL NO.	
	GEOLOGICAL S	URVEY		NM-23417		
SUND (Do not use this fo	RY NOTICES AND RE	PORTS ON epen or plug back for such propos	WELLS to a different reservoir.	6. IF INDIAN, ALLA	OTTEE OR TRIBE NAME	
1.	₹		RECEIVED	7. UNIT AGREEMEN	T NAME	
WELL GAS WELL X	4 OTHER		ADD 1 0 1000	8. FARM OR LEASE	NAME	
Harvey E. Yat	es Company		APR 1 0 1980	East Travis	s 17	
3. ADDRESS OF OPERATOR			O. C. D.	9. WELL NO.		
P. O. Box 193	3, Roswell, N. M. 8 port location clearly and in accorda	8201	ARTESIA OFFICE	10. FIELD AND, POO	OL. OR WILDCAT	
See also space 17 below At surface	1800' FSL &	2310' FEL	V^{γ}	A C — In	in pir	
	1000 100 4	2510 111		11. SEC., T., B., M. SURVEY OR	, OR BLK. AND	
				Sec. 17. T	-18S, R-29E	
14. PERMIT NO.	15. ELEVATIONS (SI	how whether DF, RT,	GR, etc.)	12. COUNTY OR PA		
	354	0.6' GL		Eddy	N. M	
16.	Check Appropriate Box To	Indicate Natu	re of Notice, Report, or	r Other Data		
NO	TICE OF INTENTION TO:		SUBS	EQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASIN	ro	WATER SHUT-OFF	REPAIR	ING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE		FRACTURE TREATMENT		NG CASING	
SHOOT OR ACIDIZE	ABANDON*		(Other) Name cha		XX XX	
(Other)	CHANGE PLANS		(Nore: Report resu	ilts of multiple comple mpletion Report and L	tion on Well	
4-8-80 In ac well	ccordance with your i has been changed fro	nstructions m East Trav	s of April 7, 198 vis #2 to East Tr	O, the name o avis 17 #1.	f this	
•					Pertodication of the control of the	
			RE	CEIVE) 0°6	
			F	APR 9 1980		
				ĘEUŁUGICAL SURVI E sia, new mexico	EULUGICAL <u>Survey</u>	
18. I hereby certify that t	the foregoing is true and correct					
SIGNED LEC	2 Harder	TITLE	Engineer	DATE	4-8-80	
APPROVED BY	CONCRET STRAFF	TITLE		DATE	APR May line	
CONDITIONS OF API	PROVAL, IF ANY:					