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NM OIL CONS COMMISSION
Drawer DD
Antesia, NM 88210
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

<p>1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. Name of Operator Harvey E. Yates Company ✓</p> <p>3. Address and Telephone No. P.O. Box 1933, Roswell, NM 88201 (505)623-6601</p> <p>4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit 0, 660' FSL & 1650' FEL Sec. 12, T-18S, R-28E</p>	<p>5. Lease Designation and Serial No. LC-028772-B</p> <p>6. If Indian, Allottee or Tribe Name</p> <p>7. If Unit or CA, Agreement Designation</p> <p>8. Well Name and No. North Travis 12 Deep #1</p> <p>9. API Well No. 30-015-23306</p> <p>10. Field and Pool, or Exploratory Area Travis Upper Penn</p> <p>11. County or Parish, State Eddy Co., NM</p>
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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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Perf & Acidized
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)*

1. 1/15/94 Perf Upper Penn @ 9834-36 & 9839-44 with 1SPF.
Acidize w/2000 gals 15% NEFE.
2. 1/21/94 Run production equipment.
3. Returned to production to test.

J. Lara
MAR - 7 1994

NEW MEXICO

RECEIVED
FEB 18 10 35 AM '94
CARTAGENA AREA

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

Signed *J. Lara*

Title Engineer

Date 2/17/94

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any: