(other) CORRECT FIELD NAME

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE **CHANGE ZONES** ABANDON*

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE NM 14757 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 to a different	7. UNIT AGREEMENT NAME			
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME			
1. oil gas well other	Murphy NW Federal 6 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
2. NAME OF OPERATOR	11			
Yates Petroleum Corporation 🗸	10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1980' FSL & 990' FWL	Richard Knob Atoka Morrow 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit L- Section 3-185-25E			
AT SURFACE: AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Eddy NM			
AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO. 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3519.5' GR			

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

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)*

SUBSEQUENT REPORT OF:

FIELD NAME CORRECTION: Originally shown as Wildcat.

CORRECTED FIELD NAME: Richard Knob Atoka-Morrow. U.S. CEOLOGICAL SURVEY

ROSWELL, NEW MEXICO

Subsurface Saf	ety Valve: Manu. and Type	·			Set @	Ft.
18. I hereby ce	rtify that the foregoing is t	true and	correct			
SIGNED JO	2 a lope	II.	Regulatory Coordinat	SATE	Oct. 27, 1980	
APPROVED BY CONDITIONS OF	ACCEPTED FOR REC	7	pace for Federal or State office use)	DATE		
,	U.S. GFOLOGICAL SI ROSWELL, NEW ME	JRVEY XCO _{*se}	e Instructions on Reverse Side			