

TOUCH COPY

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR  
Yates Petroleum Corporation ✓
3. ADDRESS OF OPERATOR  
207 South 4th St., Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980; FNL & 660' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

- |                           |                          |                          |
|---------------------------|--------------------------|--------------------------|
| TEST WATER SHUT-OFF       | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT            | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE          | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL               | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING      | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE         | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES              | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON*                  | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) Production Casing |                          |                          |

5. LEASE  
NM-0487738

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal AB Com

9. WELL NO.  
7

10. FIELD OR WILDCAT NAME  
Und. Richard Knob-Atoka Morrow

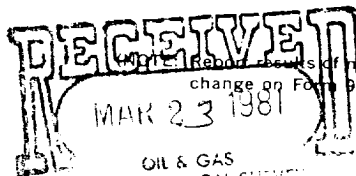
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Unit E, Sec. 9-18S-25E

12. COUNTY OR PARISH  
Eddy

13. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3573' GR



(Write 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.)\*

TD 8670' Ran 229 joints of 4-1/2" 10.5# & 11.6# K-55 LT&C & ST&C casing as follows: 36 joints of 4-1/2" 11.6# K-55 LT&C; 143 joints of 4-1/2" 10.5# K-55 ST&C; 50 joints of 4-1/2" 11.6# K-55 LT&C (Total 8673.41') of casing set at 8670'. 1-regular pattern guide shoe at 8670'. Diff-fill float at 8630'. Cemented w/250 gallons CW-100, 35 sacks 75-25 Poz, .6% D-112, .3% D-65, 5# KCL, 735 sacks 50-50 Poz, .6% D-112, .3% D-65 & 5# KCL/sack. PD 12:00 noon 3-12-81. Bumped plug to 500 psi, released pressure & float held okay. WOC. Ran Temperature Survey & found top of cement at 5800'. PBTD 8662'.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Peter W. Chester TITLE Engineering Secretary DATE 3-19-81

**APPROVED**

(This space for Federal or State office use)

APPROVED (Orig. Sgd.) PETER W. CHESTER TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**MAR 23 1981**

**JAMES A. GILLHAM**  
**DISTRICT SUPERVISOR**

See instructions on Reverse Side