

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL & GAS COMMISSION  
SUBMIT IN THE  
DATE  
INSTRUCTIONS  
VERSE SIDE  
Artesia, NM 88210

Form approved  
Budget Bureau No. 1004-G-3  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC 028978B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

Benson Deep Fed. ET Com

9. WELL NO.

1

10. FIELD AND POOL OR WILDCAT

South Leo Bone Springs

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Unit B, Sec. 33-T18S-R30E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

105 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

660' FNL & 1980' FEL

14. PERMIT NO.

API #30-015-25121

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3484.7' GR

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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

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.) \*

Propose to treat existing perforations 8318-8440' w/1000 gals acid.

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

SIGNED *John Anita*

TITLE Production Supervisor

DATE 8-31-88

(This space for Federal or State office use)

APPROVED BY *Chris*

TITLE

DATE 9-23-88

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

