

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP!  
(Other instructions  
verse side)

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Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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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 "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO NM 068038	
2. NAME OF OPERATOR Harvey E. Yates Company ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 1933, Roswell, New Mexico 88202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 790' FWL & 1700' FNL		8. FARM OR LEASE NAME Arco 5 Federal	
14. PERMIT NO. 30-015-26197		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3670.03		10. FIELD AND POOL, OR WILDCAT North Shugart Bone Springs	
		11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA Sec. 5, T18S, R31E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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.)\*

2-9-90 Perf 7431-7575 (OA) 14 holes. Spot 200 gal 20% NEFE

2-10-90 Acidize w/9000 gals, 20% NEFE & 9000 gals overflush

2-13-90 Run SN to 8265' w/anchor @ 7352', run pump and rods, hang on production.

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

SIGNED

TITLE Prod. Mgr/Engineer

DATE 2-19-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side