	<u>N.M</u>	O.C.D. COPY	
Form 9-331 (May 1963) [UNI D STATES DEPARTMENT OF THE INTER	SUBMIT IN TRIPL. (Other instructions verse side)	E• re- 5. LEASE DESIGNATION AND SERIAL NO.
•	GEOLOGICAL SURVEY		NM- 439491
(Do not use this for U	THE SECTION FOR PERMIT—" for such proposals to drill or to deepen or plug ise "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug ise "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug is a section of the section o	back to a different reservoir.	6. IF INDIAN, ALLOTTEE OF TRIBE NAME APR 4 1980
1. OIL GAS WELL WELL	OTHER	MAR 31 1980	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	U.S	GEOLOGICAL SURVEY	8. FARM OR LEASE NAME
Yates Petrole	Federal CW - B		
3. ADDRESS OF OPERATOR	/u	TESIA, NEW MEXICO	$\frac{1^{1} \text{CUCL'AL } (W - P)}{9. \text{ WELL NO.}}$
207 South 4th			
4. LOCATION OF WELL (Repo See also space 17 below.) At surface	2 10. FIELD AND FOOL, OR WILDCAT		
1650/S	Penasco Draw - SA-Yeso ^{11. sec., T., B., M., OB BLK. AND} ^{SURVEY} OR AREA Sec. 1, T19S-R24E		
14. PERMIT NO.	15. ELEVATIONS (Show whether D	F. RT. GR. etc.)	12. COUNTY OR PARISH 13. STATE
	3667.9		Eddy NM
16.	Check Appropriate Box To Indicate N	Nature of Notice, Report,	or Other Data
NOTI	ICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	
REPAIR WELL	CHANGE PLANS	(Other)	
(Other) Addition	to lease name	(NOTE: Report re	esults of multiple completion on Well completion Report and Log form.)
17. DESCRIBE PROPOSED OR CO. proposed work. If we nent to this work.)*	MPLETED OPERATIONS (Clearly state all pertiner all is directionally drilled, give subsurface loca	ut dotails and also nontinent i	ertical depths for all markers and zones perti-

A "B" has been added to the lease name of this well to distinguish it from the first well drilled. The name should now be "Federal CW-B #2.

		Posted IP3 H-11-80 H-11-80 Ch2 be nom
18. I hereby certify that the foregoing is true and correct SIGNED SIGNED	Geographer	DATE 3/31/80
(This space for Federal or State office use) (This space for Federal or State of Federa	TITLE CTIME SHOT FULL CONNER	APR 0.2 1980

*See Instructions on Reverse Side