

Form 1150-1
November 1984
Form 1150-1-1

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

1. THE APPLICANT
Budget Bureau No. 1094-01
Expires August 31, 1988
45F
5. LEASE DESIGNATION AND SERIAL NO.
NM-36500
6. IF INDIAN, ADOPTED OR TRIBE NAME

NOTICE AND REPORTS ON WELLS
This form is to be filled out by the operator of a well or by the owner of a well, or by the owner of a different reservoir.
OPERATION FOR REPORT " " for such proposals.

1. WELL NO. ☒ WELL ☐ OTHER

RECEIVED

2. NAME OF OPERATOR

Yates Petroleum Corporation

DEC 29 '88

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

810' FNL & 2180' FWL

O. C. D.
ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Cotton MX Federal Com

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undes. Upper Penn

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

S14, 19S, 25E

14. PERMIT NO.

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

API #30-015-23315

3430' GR

12. COUNTY OR PARISH 13. STATE

Eddy

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 PLANE

OTHER

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

OTHER Well Status Report

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

17. FURTHER NOTICE OF 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.*

Well shut-in since 10-12-88 waiting on electricity.

Central Valley Electric Cooperative advises that the work should be done within the next two weeks.

RECEIVED
DEC 12 10 12 AM '88
O. C. D.
ARTESIA

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

SIGNED

TITLE Production Supervisor

DATE 12-9-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE SJS

CONDITIONS OF APPROVAL, IF ANY:

DEC 2 1988

*See Instructions on Reverse Side