

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OIL COMS. COMPLETION
COMPLETION
(Other instructions on reverse side)
RECEIVED

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

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	2. NAME OF OPERATOR Harvey E. Yates Company	3. ADDRESS OF OPERATOR P.O. Box 1933, Roswell, New Mexico 88202	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 560' FSL & 990' FEL	5. LEASE DESIGNATION AND SERIAL NO. LC-029388 (b)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME AJ 11 Federal	9. WELL NO. #1	10. FIELD AND POOL, OR WILDCAT Tamano-Bone Springs	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, T18S, R31E	12. COUNTY OR PARISH Eddy	13. STATE NM
14. PERMIT NO. 30-015-26082	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3739.5 GL	RECEIVED JUL 13 '89 C. C. D. ARTESIA OFFICE										

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other) Core depths & Completion	☒
(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.) *

Core Depths

1st 8123-63
2nd 8260-64
3rd 8529-90
4th 8590-8649
5th 8649-8708

6/13/89 Perforated 8517-8618 (1 spf), Broke down w/4000 gals 2% KCL & balls. Swab test.
6/16/89 Broke down w/3500 gals NARS & balls. Swab test.
6/20/89 Broke down w/4500 gals 7 1/2% HCL & balls. Swab test.
6/27/89 Set CIBP @ 8490. Perforate @ 8121-97. Acidized w/4200 gals 20% HCL & balls. Swab test.
7/1/89 Put on pmp.

18. I hereby certify that the foregoing is true and correct
SIGNED A. M. Young NM Young TITLE Drilling Superintendent DATE 7/3/89
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side