

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

JUN 17 1991

WELL API NO.

30-015-26138

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS O. C. D.  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN AN EXISTING WELL TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

YATES PETROLEUM CORPORATION

3. Address of Operator

105 South 4th St., Artesia, NM 88210

7. Lease Name or Unit Agreement Name

Carl TP Com

8. Well No.

1

9. Pool name or Wildcat

South Dagger Draw U/Penn

4. Well Location

Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line

Section 22

Township

20S

Range

24E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3663' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Perforate, treat - existing zone ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6-14-91. Well completed in perforations 7609-7716'. Perforated 7610-7670' w/122 .50" holes (2 SPF). TIH with tubing open-ended. Acidized w/20000 gals 20% HCL (NEFE + scale inhibitor) down casing and tubing. Treat in equal stages with one drop of 1500# of graded rock salt and benzoic acid flakes in 10# gelled brine.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Juanita Goodlett

TITLE Production Supervisor

DATE 6-14-91

TYPE OR PRINT NAME

Juanita Goodlett

TELEPHONE NO. 505/748-1471

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

TITLE

SUPERVISOR, DISTRICT II

DATE

JUN 18 1991

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: