

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-2538

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Prickly Pear Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Und. North Shugart

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

Section 12-18S-31E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

YATES ENERGY CORPORATION

3. ADDRESS OF OPERATOR

P. O. Box 2323, Roswell, New Mexico 88202-2323

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

2310' FNL & 790' FWL

14. PERMIT NO.

30-015-26641

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

3757.7 GR

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.)*

4/9/91 Change in the weight of the 4 1/2" casing from 15# weight per foot to 10.5/11.6# weight per foot.

Will cement with 1,500 sx. of Halliburton Lite/Class C. cement.

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

SIGNED

Shannon J. Shaw

TITLE

Agent

DATE 4/9/91

(This space for Federal or State office use)

Signed by Shannon J. Shaw

APPROVED BY

TITLE

DATE 6/10/91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side