

C151  
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OIL CONSERVATION DIVISION

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

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

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

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

Well API NO.	30-015-29815	
5. Indicate Type or Lease	STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	V-689	
7. Lease Name or Unit Agreement Name	PALMILLO 6 STATE COM.	
8. Well No.	1	
9. Pool name or Wildcat	TURKEY TRACK MORROW, NORTH	

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"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well OIL <input type="checkbox"/> WELL GAS <input checked="" type="checkbox"/> WELL OTHER	2. Name of Operator Harvey E. Yates Company	3. Address of Operator P.O. Box 1933, Roswell, NM 88202 1-505-623-6601	4. Well Location Unit Letter K : 1,980 Feet From The SOUTH Line and 1,980 Feet From The WEST Line Section 6 Township 19S Range 29E NMPM EDDY County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3388' GL
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11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

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

OLD MORROW PERFS: 11,132-11,152'  
8-17-98 SET 5 1/2" CIBP @ 11,125'  
8-19-98 PERF MORROW 2 JSPF FROM 11,090-11,100' (21 HOLES).  
8-20 - 8-21-98 ACIDIZED PERFS w/ 1200 GALS 8% MORROW ACID CONTAINING 20% METHANOL  
8-26-98 FRAC PERFS 11,090-11,100' w/ 16K GALS 70 QUALITY FOAM & 15K #s 20-40 INTERPROP.

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

SIGNATURE RAY F. NOKES	TITLE PROD. MGR. / ENGINEER.	Date 10/8/98
TYPE OR PRINT NAME	TELEPHONE NO.	1-505-623-6601

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date 10-13-98

Conditions of approval, if any: