

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons.
N.M. Div-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993
Designation and Serial No.

LC063567

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Guadalupe Operating L.L.P.

3. Address and Telephone No.

1401 W. Cuthbert, Midland, TX 79701

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

350 FSL & 2251 FEL

Sec. 6 T-20-S R-27E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Yates Federal #10

9. API Well No.

30-015-01024

10. Field and Pool, or Exploratory Area

McMillan(7 Rivers, Queen)

11. County or Parish, State

Eddy, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☒ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

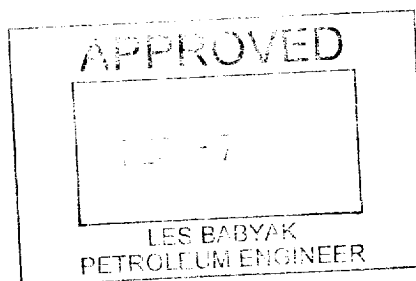
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1)

13. 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.)*

10-09-01 Spot 200 sx cmt. @ 270'.

10-11-01 Topped off well with Redi Mix cement to surface.

Approved as to plugging of the well bore.
Liability under bond is retained until
surface restoration is completed.



RECEIVED
2001 NOV 14 PM 1 56
BUREAU OF LAND MGMT.
CARLSBAD FIELD OFFICE

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

Signed

Title Agent

Date 10/12/01

Accepted for record

Title

Date

only 1-11-02

gly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements

*See Instruction on Reverse Side