

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☐ other TEMPORARILY ABANDONED
2. NAME OF OPERATOR
Yates Energy Corporation ✓
3. ADDRESS OF OPERATOR Security National Bank Bldg
Suite 919, Roswell, New Mexico 88201
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17
below.)
AT SURFACE: 330' FNL & 2310' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,
REPORT, OR OTHER DATA

- REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
- | | | |
|----------------------------|--------------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) CHANGE OF OPERATOR | | |

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.)*

CHANGE OF OPERATOR EFFECTIVE 7/1/82

FROM: Harvey E. Yates Company
P. O. Box 1933
Roswell, New Mexico 88201

TO: Yates Energy Corporation

DESIGNATION OF OPERATOR ATTACHED

5. LEASE
LC-063567
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
RECEIVED
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Yates Federal
9. WELL NO.
14
O. C. D.
ARTESIA, OFFICE
10. FIELD OR WILDCAT NAME
McMillan Seven Rivers Queen
11. SEC., T., R., M., OR BLK. AND SURVEY OR
AREA
Sec. 7, T-20S, R-27E
12. COUNTY OR PARISH 13. STATE
Eddy N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone
change on Form 9-330.)

NOV 10 1982
OIL & GAS
MINERAL MGMT. SERVICE
ROSWELL, NEW MEXICO

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED John R. McMillan TITLE Engineer DATE August 6, 1982

APPROVED BY Sgd. PETER W. CHESTER TITLE _____ DATE _____
(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

DEC 16 1982

FOR

JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side