SUNDRY		SUBMIT IN TR CATE• (Other instruct on re-	Form approved. Budget Bureau No. 42-R1424.	
DEPA SUNDRY (Do not use this form for Use "A				
(Do not use this form for Use "A	CEOLOCICAL SUBVEV	DEPARTM_NT OF THE INTERIOR verse side)		
(Do not use this form for Use "A	GEOLOGICAL SURVEY			
(Do not use this form for Use "A	NOTICES AND REPORTS C	ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
	proposals to drill or to deepen or plug b PPLICATION FOR PERMIT-" for such pr	back to a different reservoir. roposals.)		
			7. UNIT AGREEMENT NAME	
WELL WELL 01	THER			
2. NAME OF OPERATOR Harvey E. Yates <del>Oil Company</del>			8. FARM OR LEASE NAME	
			Page and Yates	
ADDRESS OF OPERATOR			J. WILL NO.	
c/o 207 Sou	th Fourth Street, Art cation clearly and in accordance with any	tesla, N. M. State requirements.*	10. FIELD AND POOL, OR WILDCAT	
L LOCATION OF WELL (Report location clearly and in accordance with any state requirements of See also space 17 below.) At surface			McMillan (Or. S.R.	
			11. SEC., T., B., M., OR BLK. AND SUEVEY OR AREA	
990/S 330	/E			
4 BERMIT NO 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			6-20-27 12-COUNTY OR PARISH 13. STATE	
4. PERMIT NO.			Sidy. N. mer	
	<u>3371' GI</u>			
.6. Cho	eck Appropriate Box To Indicate N			
NOTICE (	OF INTENTION TO:	SUBSEC	QUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING		
	t to Water Injection	(Nowr : Report result	ts of multiple completion on Well pletion Report and Log form.)	
		the state of the s	s, including estimated date of starting any cal deptns for all markers and zones perti	
Case 4209			RECEIVED JAN 81970	
			IVE	
		RECT		
		a n N <sup>r</sup>	10711	
		1111	7 - 1970	
		JAI	ENED 7-1970	
		JAN	z - 197U	
		JAN	7 - 1970	
		JAU	z - 197U	
		JAN	z - 197U	
18. I hereby certify) that the fo	regoing is true and correct		1-5-7	
signed. Eddiel	in lialy TITLE E	Jµn Engineer		
Zildin	in lialy TITLE E		DATE 1-5-20	
SIGNED . Eddie	State office use)		1-5-7	
SIGNED Zddie (This space for Federal or	State office use)		DATE 1-5-20	
SIGNED Zddie (This space for Federal or	State office use) State office use) TITLE YAL, IF ANY:	Ingineer	DATE 1-5-20	
SIGNED Zddie (This space for Federal or	State office use) State office use) TITLE YAL, IF ANY:		DATE 1-5-20	
(This space for Federal or	State office use)		DATE <u>1-5-20</u>	