N. M. O. C. C. Com

Copy to SF

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved
Budget Bureau No. 42

5. LEASE DESIGNATION AND SERIAL

LC 063567

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—" for such proposals.)

6. IF INDIAN, ALLOTTEE OR TRIBE

1.
OIL WELL ☐   GAS WELL ☐   OTHER Water injected well

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Harvey E. Yates ~~Company, Inc.~~ ✓

8. FARM OR LEASE NAME
Yates Federal

3. ADDRESS OF OPERATOR
Suite 1000, Security National Bank Bldg., Roswell, N.M. 88201

9. WELL NO.
6

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

990 FSL & 330 FEL   RECEIVED

10. FIELD AND POOL, OR
McMillan Seven Rivers Queen

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 6, T-20S, R-27E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 9 — 1-77
3371 GL

12. COUNTY OR PARISH   13. STATE
Eddy   N.M.

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) TEMPORARY ABANDON	X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL
FRACTURE TREATMENT ☐	ALTERING CASING
SHOOTING OR ACIDIZING ☐	ABANDONMENT*
(Other) *temporary abandonment*	

(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.) *

As per your request, we are filing this form 9-331. This well is temporarily abandoned.

In the event the well is put back on active status, we will so advise.

RECEIVED
FEB 03 1977
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED _____   TITLE Accountant   DATE 2-2-77

(This space for Federal or State office use)

APPROVED BY _____   TITLE **ACTING DISTRICT ENGINEER**   DATE **FEB 8 1977**
CONDITIONS OF APPROVAL, IF ANY:

See Instructions on Reverse Side