

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 03677

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR		Harvey E. Yates	
3. ADDRESS OF OPERATOR		8. FARM OR LEASE NAME	
Harvey E. Yates		Stebbins, Fed	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)		9. WELL NO.	
At surface SW/4 SW/4 NE/4 2310 fr N & E line of 30-20-29		2	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT	
15. ELEVATIONS (Show whether DF, RT, GL, etc.)		Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
		30-20-29	
		12. COUNTY OR PARISH	
		Eddy	
		13. STATE	
		N.M.	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACURE TREAT ☐	MULTIPLE COMPLETION ☐	FRACURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☒	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	

(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.)*

We intend to run tubing. Circulate hole w/501.

Spot 100' cmt plug from 900 to 1000. Spot 100' cmt plug from 428 to 528 with a 20' plug at surface and place reg. dry hole marker.

RECEIVED
AUG 23 1966
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED _____ TITLE Bookkeeper DATE October 21, 1964

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

COMMISSIONER OF APPROVAL, IF ANY:

APPROVED
AUG 24 1966
H. L. BEEKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side