

UNITED STATES GEOLOGICAL SURVEY  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRI  
(Other instructio  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14 05110-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Galvin

9. WELL NO.

7

FIELD AND POOL, OR WILDCAT  
McMillan 7-Rivers

11. SEC. T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 12-20S-26E

Unit A NMPM

12. COUNTY OR PARISH 13. STATE

Eddy

N.Mex.

1. OIL ☒ GAS ☐  
WELL WELL OTHER Re-Entry

2. NAME OF OPERATOR

S. P. Yates /

3. ADDRESS OF OPERATOR

207 So. 4th Street-Artesia, New Mexico 88210

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

990' FSL & 1650 FWL of Sec. 12-20S-26E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3274' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Spud & Set 5½" casing

REPAIRING WELL

ALTERING CASING

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 perti-  
nent to this work.)\*

11-12-69 - Re-Entered well and pulled 11' of 5½" casing and  
started cleaning out with an 8" tool.

11-14-69 - Cleaned out to 70' and set 5½" 15.5# J-55 casing and  
cemented with 4 yds of Ready-Mix. SI 72 hours and  
drilled out and bailed hole dry. Drilled 10' and  
set pumping equipment.

This well was not acidized.

RECEIVED

NOV 23 1969

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

SIGNED

TITLE

Supt. of Prod.

DATE

11-25-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL (SEE INSTRUCTIONS)

TITLE

DATE

ACCEPTED FOR RECORD PURPOSES  
NOV 25 1969  
Date  
ACTING District Engineer

\*See Instructions on Reverse Side