

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

Budget Bureau No. 1004-0135
Expires August 31, 1985

dsf

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		RECEIVED BY MAR 28 1986 O. C. D. ARTESIA, OFFICE		5. LEASE DESIGNATION AND SERIAL NO. NM 9531	
2. NAME OF OPERATOR Yates Petroleum Corporation				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210				7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650 FNL & 630 FEL, Sec. 14-T21S-R22E				8. FARM OR LEASE NAME Hilliard BF Federal	
				9. WELL NO. 1-Y	
				10. FIELD AND POOL, OR WILDCAT Wildcat Strauss	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit H, Sec. 14-T21S-R22E	
14. PERMIT NO. API #30-015-20059		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4154' KB		12. COUNTY OR PARISH Eddy	
				13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Set CIBP, Perforate, Treat			<input checked="" type="checkbox"/>

(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.) *

3-4-86. RUPU.
3-5-86. Set CIBP at 8685' w/35' cement cap. WIH and perforated 8613-46' w/15 .35" holes as follows: 8613, 16, 18, 21, 25, 27, 29, 31, 32½, 34, 36, 38, 40, 43 and 46'. Acidized perms 8613-46' w/1500 gals 15% MS acid w/1500 SCF N2 and 12 ball sealers.
3-8-86. Set CIBP at 8530' w/35' cement cap. WIH and perforated 8238-88' w/15 .35" holes as follows: 8238, 41, 42, 46, 57, 61, 64, 66, 68, 76, 80, 82, 84, 86 and 88'. Acidized perms 8238-88' w/1500 gals 15% NEFE acid and 12 ball sealers.
3-13-86. WIH and perforated 7927-41' w/10 .40" holes as follows: 7927, 28, 29, 30' (4 holes); and 7938-41' (6 holes). Acidized perms 7927-41' w/1500 gals 7½% NEFE acid and 9 ball sealers. Perforations open at 7927-30' (4 holes), 7938-41' (6 holes) and 8238-88' (15 holes).

ACCEPTED FOR RECORD

GWQ

MAR 24 1986

CARISBAD, NEW MEXICO

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

SIGNED <i>Granta Dosslett</i>	TITLE Production Supervisor	DATE 3-20-86
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

Post ID-2
4-11-86
PLA Mar.