

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210
FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Harvey E. Yates Company

3. Address and Telephone No.
P.O. Box 1983, Roswell, NM 88202 1-505-623-6601

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
G, 1980' FN & EL
SW/NE SEC. 31, T-20S, R-29E

5. Lease Designation and Serial No.
NM-19672

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
FANNIE LOU FEDERAL #1

9. API Well No.
30-015-21617

10. Field and Pool, or Exploratory Area
SCANLON MORROW

11. County or Parish, State
EDDY CO., NM

12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION

☒ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☒ Casing Repair

☐ Altering Casing

☐ Other

AND PB & TEST UPPER FORMATIONS

☐ Change in Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log Form.)

13. 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.)

1. TEST CASING w/ PKR TO VERIFY LOCATION OF HOLE, (ABOUT 6201').
2. IF CASING BAD THEN PERFORATE 4 HOLES JUST BELOW INTERVAL FOR SQUEEZING. SET CEMENT RETAINER ABOVE BAD INTERVAL & CEMENT. (IF PARTNERS APPROVE WILL BRING CEMENT BACK INSIDE INTERMEDIATE OR EVEN TO SURFACE).

3. DRILL OUT & TEST.

4. PERFORATE STRAWN & TEST. (NOTE: CIBP @ 11,284 w/ 50' CMT ON TOP- NEW PBTD @ 11,234)
5. IF STRAWN NOT COMMERCIAL WILL SET CIBP @ 9194' PLUS 50' OR 150' CMT PLUG, (TOP OF WOLFCAMP).

POSSIBLE ZONES TO TEST IF STRAWN NOT COMMERCIAL: BONE SPRING & OR DELAWARE.

NOTE: IF ADDITIONAL TESTING UNSUCCESSFUL THEN CIBP & 50' CMT WILL BE PLACED WITHIN 50' OF UPPER MOST PERF IN HORIZON.

FENCED PIT ON LOCATION NORTH OF WELL HEAD TO BE USED FOR OPERATION TO FIX CASING AND DURING WORKOVER. OPERATION TO COMMENCE IN ABOUT 60 DAYS OR AS SOON AS POSSIBLE AFTER PARTNER APPROVAL.

ALL ABOVE APPROVED VERBALLY BY SHANNON SHAW, BLM 2-6-95. rfn

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

Signed Ray F. Nokes TITLE

PROD. MGR./ ENG.

Date 2/6/95

(This space for Federal or State office use)

Approved by Shannon Shaw Signed by Shannon Shaw

TITLE PETROLEUM ENGINEER

Date 3/10/95

Conditions of approval, if any:

