

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.
NM 1126
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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Junked Hole		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Yates Petroleum Corporation		8. FARM OR LEASE NAME NW Indian Basin Unit
3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, NM 88210		9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1885' FSL & 2080' FWL of Section 12-21S-22E		10. FIELD AND POOL, OR WILDCAT Undesignated / Ponderosa
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-21S-22E Unit K NMPM		12. COUNTY OR PARISH Eddy
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4107' GR	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)	<input type="checkbox"/>		<input type="checkbox"/>

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 type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<input 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.)*

TD 1750' - Washed 7-7/8" hole outside of casing to 700' and spotted 370' sacks of Class "C" cement 4% CaCl w/3#/sx 20-40 sand at 700-300', spotted 110 sacks of Class C cement 2% CaCl at 120' to surface, filled hole w/5 yards of Ready-mix. Rig skidded 20' to the west to re-drill well.

RECEIVED

JAN 26 1977

G. D. G.
ARTESIA, OFFICE

RECEIVED

JAN 03 1977

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

POSTER
ID-2
P. A.
1-14-77

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

SIGNED Christie Tomlinson TITLE Geol. Secty DATE 12-31-76

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
JAN 2 1977
X [Signature]
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side