

NMOCC COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other Instructions on
reverse side)

Copy 10 27
Form approved.
Budget Bureau No. 42-R1424.

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		5. LEASE DESIGNATION AND SERIAL NO. NM 01165	
2. NAME OF OPERATOR Yates Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 207 South 4th Street - 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 1980' FSL & 1980' FWL of Sec. 7-20S-29E		8. FARM OR LEASE NAME Williamson "BC"	
14. PERMIT NO.		9. WELL NO. 4	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3285' KB		10. FIELD AND POOL, OR WILDCAT, ETC. West Burton Flats Atoka	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7-20S-29E Unit K NMPM	
		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Remedial Work & PB <input checked="" type="checkbox"/>	
(Other) <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.) *

The Upper Morrow pay 11264-11271' was depleted. Pulled tubing and packer, additionally perforated new Morrow sands at 11219-11221 & 11024-11030 w/ 2 jet shots/ ft. 0.34". RIH w/packer and bridge plug on tubing and treated perfs 11219-11221 w/1000 gallons 10% Morrow-flo acid & Nitrogen. After swab back well flowed gas TSTM. Re-set packer and bridge plug and treated perfs 11024-11030 w/1000 gal. MSA and Nitrogen. After swab back well flowed gas TSTM. Reset packers and bridge plug and treated old perfs 11264-11271 w/2000 gal. 7½% MSA without improvement, zone depleted. Pulled packer & bridge plug, pulled packer and blanking plug from 11343' and re-set same at 10976' KB thereby temporarily abandoning the Morrow perforations 11024-11391'. Pulled tubing from On-Off-Toll at 10976', RIH w/Tubing Conveyed gun & pkr, set Guiberson pkr at 10738' and perforated the Atoka formation at 10792-10800 Well flowed natural 900# on 3/4" choke. (10792-10800' w/32 .50" holes 4 spf)

RECEIVED

MAY 10 1978

18. I hereby certify that the foregoing is true and correct		U.S. GEOLOGICAL SURVEY	
SIGNED <u>Eddie M. Malford</u>	TITLE <u>Engineer</u>	DATE <u>5-10-78</u>	
(This space for Federal or State office use)			
APPROVED BY <u>Joe S. Lara</u>	TITLE <u>ACTING DISTRICT ENGINEER</u>	DATE <u>MAY 12 1978</u>	
CONDITIONS OF APPROVAL, IF ANY:			