

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI
(Other instructions
on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO

NM-21012

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal HQ

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated Permo Penn

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

Unit N, Sec. 5-T21S-R22E

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

105 South 4th St., Artesia, NM 88210

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

At surface

990' FSL & 1980' FWL, Sec. 5-T21S-R22E

14. PERMIT NO.

API #30-015-22120

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

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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Set CIBP, perforate, trt

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

Upper Penn

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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 pertinent to this work.)*

Well is presently commingled in Atoka perms 7967-78' and 8076-86', and Cisco perms 6020-32' and 6100-10'. Propose to set CIBP at 7900' w/cement cap, perforate additional Upper Penn at 7539-44' and 7642-45'. Will stimulate as need for production.

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

SIGNED

TITLE Production Supervisor

DATE 6-24-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 7-19-88

CONDITIONS OF APPROVAL, IF ANY

*See Instructions on Reverse Side