

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 ☐ 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
660' FNL & 1980' FEL, Sec. 1-22S-21E

14. PERMIT NO.
API #30-015-22149

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

5. LEASE DESIGNATION AND SERIAL NO
NM 6005

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Brainerd IO Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Box Canyon Permo Penn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit B, Sec. 1-T22S-R21E

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	(Other) Perforate additional in existing zone.	
ABANDON*	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
CHANGE PLANS	<input type="checkbox"/>		

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.) *

11-10-88. Perforated 5543-5615' w/10 .40" holes as follows: 5543, 45, 47, 5601, 5602, 5609, 12, 13, 14, and 5615'.
11-11-88. Straddled perforations 5601-5615'. Treated w/1250 gals 15% NEFE acid and 5 ball sealers. Straddled perforations 5543-5547' and treated w/750 gals 15% NEFE acid.

Perforations open: 6212-30' and 6321-69' (old perfs)
5543-47' and 5601-15' (new perfs in existing zone)

ACCEPTED FOR RECORD

NOV 13 1988

CARISBAD, NEW MEXICO

NOV 17 11 55 AM '88

RECEIVED

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

SIGNED Jose Anita Dos Illes

TITLE Production Supervisor

DATE 11-16-88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side