

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

RECEIVED

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 Form 9-331-C for such proposals.)

1. oil ☐ well gas ☒ well other

2. NAME OF OPERATOR
Yates Petroleum Corporation

3. ADDRESS OF OPERATOR
207 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1980 FNL & 1980 FWL
AT SURFACE: Sec. 11-T21S-R26E
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Frac well.

SUBSEQUENT REPORT OF:

☐
☒
☐
☐
☐
☐
☐
☐
☐

5. LEASE

NM 3606

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. LEASE AGREEMENT NAME

8. FARM OR LEASE NAME

Lake Shore XH Federal Com

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Undes. Morrow

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

Unit F, Sec. 11-T21S-R26E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3184' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Swabbed well after acidizing perforations 10967-74'.
9-21-83. Sand frac'd perforations 10967-74' w/1000 gallons 7½%
Morroflow acid, 20000 gallons MSF and CO₂, 29900# (3500# 100 Mesh and
26400# 20/40) sand. Flowed well back. Recovering load.

RECEIVED BY

SEP 28 1983

O. C. D.
ARTESIA, OFFICE

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED [Signature] TITLE Production Supervisor

DATE 9-22-83

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

SEP 27 1983

*See Instructions on Reverse Side