(Formerly 9–331) DEPARTME	TED STATES NT OF THE INTERIOR IF LAND MANAGEMENT	SUBMIT IN TF (CATE* (Other instruct. on re- verse side)	Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND BERIAL NO NM 58145
SUNDRY NOTICE (Do not use this form for proposals Use "APPLICATIO	S AND REPORTS ON to drill or to deepen or plug back to N FOR PERMIT" for such propose	o á different reservoir. ls.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1.		RECEIVED	7. UNIT AGREEMENT NAME
	ange well status to c)11.	8. FARM OR LEASE NAME
2. NAME OF OPERATOR Yates Petroleum Corporation APR 18 '88			Springs AEU Federal Com
3. ADDRESS OF OPERATOR	· · · · · · · · · · · · · · · · · · ·	AIN 10.00	9. WBLL NO.
105 South 4th St., Artesia, NM 88210 C.C.D.			1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. L. D. See also space 17 below.) At surface 1960' FNL & 1550' FEL			10. FIELD AND POOL, OR WILDCAT
			Undes. Bone Springs 11. SEC., T., B., M., OB BLK. AND
			SURVEY OF ARMA Unit G-
			Lot 7, sec. 3-T21S-R25E
API #30-015-25865	5. ELEVATIONS (Show whether DF, RT, G 3306 [†] GR	к, etc.)	12. COUNTY OR PARISH 13. STATE Eddy NM
16. Check Appro	priate Box To Indicate Natur	e of Notice, Report, or C	Other Data
NOTICE OF INTENTION	T O :	SUBSEQU	ENT REPORT OF ;
	OR ALTER COSING	WATER SHUT-OFF FRACTURE TREATMENT	HEPAIRING WELL
SHOOT OR ACIDIZE ABAN		Other)	ABANDONMENT*
(Other) Plug back & test Bone Springs X (Other) Plug back & test Bone Springs			
3-17-88. Set CIBP at 999 pull.	5' w/35' cement on to	p. Cut 5½" casing	at 8980' and could not
 Propose to plug back and 1) Set cement retainer a 2) Perforate 4 holes at 3) Perforate 4 holes at imately 900 sacks. C 4) Selectively perforate 	t 8950' and pump 50 s 8100'. Set cement r 7350'. Set cement r alculate cement top t	x cement through c etainer at 8050' a etainer at 7300' a o be at 4000'.	asing cut at 6960 .
Verbal approval for the a 3-21-88, by Ray Stall, Ya	bove procedure obtain tes Petroleum Corpora	ed from Shannon Sh tion.	aw, BLM, Carlsbad, NM,
J-21-00, by Kay Starr, ra		·	RECEIVED
18. I hereby certify that the foresding is tru	e and correct		Ron Co
	F	ion Supervisor	DATE 3-22-88
site i anda / Do			
(This space for Federal or State office us			DATE 4-1488
APPROVED BY ACT ACC CONDITIONS OF APPROVAL, IF ANY :	are TITLE		DATE 4-14

*See Instructions on Reverse Side