

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO
NM- 64594

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

Harvey E. Yates Company

3. ADDRESS OF OPERATOR

P.O. Box 1933, Roswell, New Mexico 88202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

P, 330' FSL & 790' FEL

14. PERMIT NO

30-015-26631

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

3192.2' GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Cabin Lake "34" Fed.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Cabin Lake Delaware

11. SEC., T., R., M., OR B.L. AND
SURVEY OR AREA

Sec. 34, T-21s, R-30E

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

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Surface Disposal Pits

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

REPAIRING WELL

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

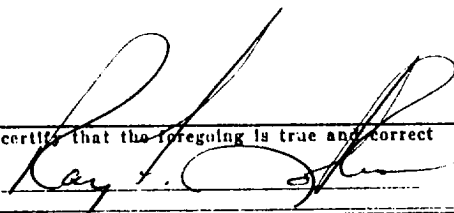
Request for approval for produced water disposal into unlined surface pits located on the east side of location (see plat), which is within R-3221-B State approved area for surface disposal. Pit will be fenced & have net over surface disposal. Pits will be sectionalized as stated to Shannon 6-3-91, as well as fiberglass setup to skim oil from tank & returned to production tanks. Water will be siphoned from bottom of fiberglass and inturn run to pits by means of polypipe. Current production of water is about 265 to 340 BWPd. Due the extreme cost for hauling water it is requested that permission be granted to proceed with plan to build surface pits.

Note: This disposal facility will be used by future wells in Sec. 34 & possibly wells in Sec. 3.

Respectfully yours,

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

SIGNED



TITLE Prod. Mgr/ Eng.

DATE 6-4-91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side