

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)
AT SURFACE: 1980 FSL & 1980 FWL, Sec. 15-7S-25E
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input checked="" type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other) Perforate & Treat	

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.)*

TD 4950'. With and perforated 13 .50" holes as follows: 4006-18' (1 SPF).
Acidized perforations 4006-18' w/2000 gallons 7½% NE acid. Sand frac'd perfs
4006-18' w/40000 gallons gelled KCl water, 70000# 20/40 sand.
Well cleaned up and stabilized at 250 psi on 3/4" choke = 3811 mcfpd.

5. LEASE
NM 10893
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Godfrey MP Federal
9. WELL NO.
8
10. FIELD OR WILDCAT NAME
Pecos Slope Abo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit K, Sec. 15-T7S-R25E
12. COUNTY OR PARISH
Chaves
13. STATE
NM
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3811' GR

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

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED Peter W. Chester TITLE Engineering Secty DATE 9-13-82

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL

PETER W. CHESTER

TITLE

DATE

SEP 29 1983

*See Instructions on Reverse Side

RECEIVED BY

SEP 30 1983

O. C. D.

ARTESIA, OFFICE