

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Artesia, NM 88210
Drew DD

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM 36707

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Eddleman Federal #2

9. API Well No.

30-005-61369

10. Field and Pool, or Exploratory Area

West Pecos Slope Abo

11. County or Parish, State

Chaves, NM

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED

NOV 24 1992

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Rault Petroleum Co., % Yates Petroleum Corporation

3. Address and Telephone No.

105 South 4th St., Artesia, NM 88210

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit G, 1980' FNL & 1980' FEL, Sec. 9-T7S-R22E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Test Well

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

9-28-92 Well had 0# SITP - 810# SICP

Made three (3) swab runs on well and well kicked off. Well flowed back 30 bbls of water over next 1-1/2 hrs. Well stabilized at 30# FTP on 3/4" choke in 2 hrs with light mist. Pinched well back to 20/64" choke and left flowing for 2 hrs. Well stabilized at 140# FTP on 20/64" choke = 340 mcf/d. Shut in for pressure build-up.

10-1-92 SITP - 840# - SICP - 820#

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

Signed Marita Goodlett

Title Production Supervisor

Date 11-4-92

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

ACCEPTED FOR RECORD
PETER W. CHESTER
Date _____

NOV 19 1992

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

BUREAU OF LAND MANAGEMENT
ROSSELL RESOURCE AREA

