

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

C/SF

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 & 660 FEL, Sec. 9-8S-25E
AT SURFACE:
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"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) CORRECTED FLOW RATE			

5. LEASE

NM 9539

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

7. UNIT AGREEMENT NAME

APR 12 1982

8. FARM OR LEASE NAME

Williamson LC Federal

O. C. D.

9. WELL NO.

6

ARTESIA, OFFICE

10. FIELD OR WILDCAT NAME

~~Und.~~ Pecos Slope Abo

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

Unit H, Sec. 9-T8S-R25E

12. COUNTY OR PARISH

Chaves

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3635' 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.)*

CORRECTED FLOW RATE:

Previous flow rate of 150 psi on 3/4" choke = 2200 mcfpd taken on 4-4-82 was in error.

Corrected flow rate is 11 psi on 3/4" choke = 360 mcfpd.

Well stabilized on 4-7-82.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Engineering Secty DATE 4-9-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
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Yates Petroleum Corporation /
3. ADDRESS OF OPERATOR
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TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input checked="" type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) Production Casing, Perforate	

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TD 4250'. Ran 105 joints 4-1/2" 9.5# J-55 casing set at 4233'. Auto fill float shoe set 4233'. Cemented w/350 sacks 50/50 Poz, .6% CF-9, .3% TF-4 and 2% KCL. Compressive strength of cement - 1050 psi in 12 hours. PD 5:45 AM 3-27-72. Bumped plug to 1200 psi, released pressure and float held okay. WOC. WIH and perforated 3867-3922' w/11 .50" holes as follows: 3867, 68, 69, 70, 72, 73, 74, 80, 3919, 20, 22'. Acidized perforations 3867-3922' in 2 stages. Stage 1: 3919-22' w/500 gallons 7 1/2% Spearhead acid. Stage 2: 3867-80' w/1500 gallons 7 1/2% Spearhead acid and 3 balls. Frac'd perforations 3867-3922' w/20000 gallons gelled 2% KCL and 40000# 20/40 sand and 5000 gallons CO2. Flow stabilized at 150 psi on 3/4" choke = 2200 mcfpd.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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SIGNED William L. Doolittle TITLE Engineering Secty. DATE 4-5-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

5. LEASE NM 9539

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Williamson LC Federal

9. WELL NO.
6

10. FIELD OR WILDCAT NAME
Und. Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Unit H, Sec. 9-T8S-R25E

12. COUNTY OR PARISH Chaves 13. STATE NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3635' GR

RECEIVED

APR 7 1982

O. C. D.
ARTESIA, OFFICE

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

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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) ☐

SUBSEQUENT REPORT OF:

☒☐☐☐☐☐☐☐☐5. LEASE
NM 9539

6. IF INDIAN, ALLOTTEE OR TRIBE NAME RECEIVED

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APR 7 1982

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Spudded a 14-3/4" hole at 11:00 PM 3-12-82. Set 40' of 20" conductor pipe. Ran 24 joints of 10-3/4" 40.5# J-55 casing at 962'. 1-Texas Pattern notched guide shoe at 962'. Insert float at 922'. Cemented w/200 sacks Thixolite, 1/4# Permacheck, 1/2# celloseal, 3% CaCl₂, 500 sacks Pacesetter Lite, 3% CaCl₂ and 1/4# celloseal. Tailed in w/300 sacks Class "C" with 2% CaCl₂. Compressive strength of cement-1250 psi in 12 hours. PD 3:20 AM 3-19-82. Bumped plug to 750 psi, released pressure and float held okay. Cement did not circulate. *Set a 250 sack Class C 2% CaCl₂ plug through 1" inching. Circulated colored water and USGS okayed. Drilled out at 10:45 AM 3-20-82. WOC 31 hours and 25 minutes. Nippled up and tested to 1000 psi, okay. Reduced hole to 7-7/8". Drilled plug and resumed drilling.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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SIGNED William A. Rodlett TITLE Engineering Secty. DATE 4-5-82

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APPROVED BY _____ TITLE _____ DATE _____

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