

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.)

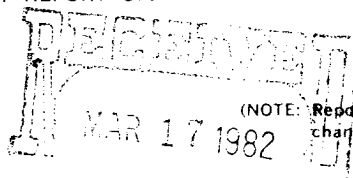
1. oil ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR
Yates Petroleum Corporation
3. ADDRESS OF OPERATOR
207 South 4th St., Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
660' FNL & FEL, Sec. 27-5S-24E
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

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(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.)*

Set 40' of 20" conductor pipe. Spudded a 14-3/4" hole at 3:45 PM 3-12-82. Ran 24 joints of 10-3/4" 40.5# J-55 casing set at 959'. 1-Texas Pattern guide shoe at 959'. Insert float set at 920'. Cemented w/500 sacks Halliburton Lite with 2% CaCl. Tailed in w/200 sacks Class "C" with 2% CaCl. PD 5:30 AM 3-14-82. Bumped plug to 750 psi, released pressure and float held okay. Cement circulated 50 sacks. WOC. Drilled out 11:30 PM 3-14-82. WOC 18 hours. Nipped 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.

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

SIGNED _____ TITLE Engineering Secty DATE 3-16-82

ACCEPTED FOR RECORD
ROGER A. CHAPMAN
APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

MAR 19 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

(This space for Federal or State office use)

TITLE _____ DATE _____

*See Instructions on Reverse Side