

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 S. 4th, Artesia, New Mexico 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL and 1980' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH same

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

5. LEASE
NM-2357

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal HS

9. WELL NO.

Federal "HJ" #4

10. FIELD OR WILDCAT NAME

Undes. Pecos Slope Abo

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

Sec. 31-T6S-R26E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3687.0 GL

(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.)*

Casing program has been changed from:

8 5/8" casing @ 950'
4 1/2" casing to TD

To: 10 3/4" casing @ 900'
8 5/8" casing @ 1580'
4 1/2" casing to TD



Subsurface Safety Valve: Manu. and Type

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

SIGNED *Regulatory Secy.* TITLE *Regulatory Secy.* DATE *3/15/82*

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO