

RECEIVED

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: 990' ENL and 660' FEL
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"/>

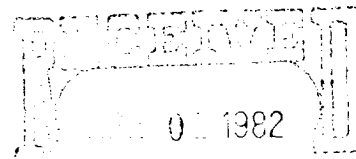
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Change surface casing size from: 10 3/4" 40.5# J-55

to: 8 5/8" 24#

5. LEASE
NM 15294
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
O. C. D.
ARTESIA, OFFICE
8. FARM OR LEASE NAME
Bosque Grande "SQ" Federal Com.
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Undes. Pecos Slope Abo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 8-T7S-R26E
12. COUNTY OR PARISH
Chaves
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3594.3 GL

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



U.S. GEOLOGICAL SURVEY
NEW MEXICO

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED *George H. Stewar* TITLE Regulatory Secy. DATE 3/31/82

APPROVED (This space for Federal or State office use)
APPROVED BY *James A. Gillham* DATE
CONDITIONS OF APPROVAL, IF ANY.

APR 1 1982
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side