NM ULL COMO. Comment Drawer DD

Form Approved. Budget Bureau No. 42-R1424

88210

UNITED STATES Artesia, NM DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

5.	LEASE	
	NM	19416

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Langley RJ Federal

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

MAY - 3 1982

O. C. D.

ARTESIA, OFFICE

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.)

well [X]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 FSL & FEL, Sec. 9-6S-25E AT SURFACE:

AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

10. FIELD OR WILDCAT NAME Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR Unit P, Sec. 9-T6S-R25E

12. COUNTY OR PARISH 13. STATE Chaves NM

14. API NO.

9. WELL NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 3987.6 GR

on Form 9-330.)

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)

Report results of multiple completion or zone

OIL & GAS (other)
U.S. GEOLOGICAL SUBVEY

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.)*

Spudded a 12-1/4" hole 4:30 PM 4-3-82. Set 40' of 20" conductor pipe. Ran 23 joints of 8-5/8" 24# J-55 casing set at 925'. 1-Texas Pattern guide shoe set at 925'. Insert float set 884'. Cemented w/400 sacks Pacesetter Lite w/3% CaCl. Tailed in w/300 sx Class "C" w/2% CaCl. PD 9:00 PM 4-4-82. Bumped plug to 750 psi, released pressure and float held okay. WOC. Drilled out 3:00 AM 4-5-82. WOC 18 hours. Nippled up and tested to 1000 psi, okay. Drilled plug and resumed drilling.

SUBSEQUENT REPORT OF:

ACCEPTED FOR RECORDS. Subsurface Safety Valve: Manu. and Type _____ 18. I hereby certify that the foregoing is true and correct a_o dell TITLE Engineering Secty DATE SIGNED 4 (This space for Federal or State office use) GEOLOGICAL SURVEY DATE TITLE APPROVED BY ROSWELL, NEW MEXICO CONDITIONS OF APPROVAL, IF ANY: