

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUNDARY NOTICES AND REPORTS ON WELLS
Artesia, NM 88210
Drawer DD

Submit in triplicate (Other instructions on reverse)
Budget Bureau No. 1004-0135
Expires August 31, 1985
LEASE DESIGNATION AND SERIAL NO.
NM-37128

RECEIVED BY

JAN 16 1985

1. ☒ OIL WELL ☒ GAS WELL ☐ OTHER
ARTESIA OFFICE

YATES PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

207 SOUTH FOURTH STREET, ARTESIA, NEW MEXICO 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FNL and 1980' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4954' GL

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Chisum AAW Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat - *Also*

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

Sec. 27-T2S-R19E

12. COUNTY OR PARISH

Lincoln

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

☒

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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 casing plans from:

17 1/2" hole 13 3/8" casing 400' circ.

12 1/4" hole 8 5/8" casing 1200' circ.



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

SIGNED

TITLE Regulatory secretary

DATE 1/3/85

(This space for Federal or State office use)

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side