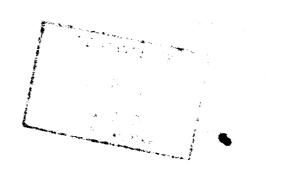
UNITEL STATES 88210 DEPARTMENT OF THE NEERIOR 88210

5. LEASE

DEPARTMENT OF THETHUSERIORM GEOLOGICAL SURVEY			LC-067348 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
Do not use this form for pri	CES AND REPORTS	olug buck to and and	7. UNIT AGREEMENT NAME	
reservoir. Use Form 9-331-C	for such proposals.)	ECEIVED BY	8. FARM OR LEASE NAME	
1. oil w gas	R	ECELLED	Federal DY	
well X well	☐ other	JUN 16 1986	9. WELL NO.	
2. NAME OF OPERATO	OR /	IIIN 16 1300	1	
Yates Drilling	Company	~ n	19. FIELD OR WILDCAT NAME	
		O. C. D.	Turkey Tract Q-G-SA	
207 South 4th	Street, Artesia, N	N ANTESIANTO	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
3. ADDRESS OF OPERATOR 207 South 4th Street, Artesia, NATES 210 4. LOCATION OF WELL (REPORT LOCATION STEARLY, See space 17)			AREA	
below.)			Section 28-18S-29E	
AT SURFACE: 660' FNL & 660' FEL			12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL:			Eddy N.M.	
AT TOTAL DEPTH:			14. API NO.	
	TE BOX TO INDICATE N	ATURE OF NOTICE,		
REPORT, OR OTHE	R DATA		15. ELEVATIONS (SHOW DF, KDB, AND WD)	
			3454' GR	
REQUEST FOR APPROV		INT REPORT OF:		
TEST WATER SHUT-OFF				
SHOOT OR ACIDIZE				
REPAIR WELL PULL OR ALTER CASIN	ic []		(NOTE: Report results of multiple completion or zone change on Form 9-330.)	
MULTIPLE COMPLETE			Change on Form 3-330.)	
CHANGE ZONES	i i			
ABANDON*	[x]			
(other)				
including estimated	SED OR COMPLETED OPER date of starting any propo vertical depths for all mark	osed work. If well is a	te all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and nit to this work.)*	
11-11& 12-85	Perfs: 1975'-81	Retainer 19	50', squeezed with 50 sxs.;	
11 114 12 03	Dumped 1 bbl. on			
	Perfs: 880' Retainer 849', squeezed with 50 sxs.; Dumped			
	1 bbl. on top of retainer (60').			
	Perfs: 450' via 4½" csg., squeezed 50 sxs. Pipe full to surface			
	Squeezed 15 sxs. into bradenhead = left full.			
	-1			
	Installed Dry Ho	le Marker.		
			•	
		42		
Subsurface Safety Valve	: Manu. and Type		Set @ Ft.	
18. I hereby certify that	the foregoing is true and co	orrect		
9. 0				
SIGNED TOTHER Y.	Leishman TITE of This spa	e Production (Clerk DAIE 11-15-85	
	/ (This spa	ce tog Federal or State of	ffice use)	
Sha.	1 show at		DATE 6-13 8C	
APPROVED BY	U- W	ILE' - NEDELAN IN DATE WHEEL I	DATE	



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