

NMOCC COPY UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-15446

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Rebecca Crosby

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Cato-San Andres

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

Sec. 31, T-7S, R-31E

12. COUNTY OR PARISH 13. STATE

Chaves

N. M.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. NAME OF OPERATOR Harvey E. Yates Company	
3. ADDRESS OF OPERATOR P. O. Box 1933, Roswell, New Mexico 88201	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FEL & 660' FSL	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4227.1' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Spud, run casing and test</u> <input checked="" type="checkbox"/>	

(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.)*

3-17-78 Spudded 11" hole at 4:00 pm.

3-18-78 Ran 1240' (31 joints) 8 5/8" 23# 8RD R-3 ST&C casing set and cemented at 1252' with 375 Sx of Lite, 5# salt/sx and 100 Sx Cl C 2% CaCl. Plug down at 6:00 pm 3-18-78. Circulated 25 Sx.

WOC 18 Hours

3-19-78 Pressure test casing to 1500# for 30 minutes. OK.

RECEIVED
MAR 28 1978
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Peter Harder

TITLE Engineer

DATE 3-23-78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

Joe J. Lara

TITLE ACTING DISTRICT ENGINEER

DATE APR 4 - 1978

*See Instructions on Reverse Side

1944

1944

1944
OIL COMPANY, 1944
1944, 11, 11

ARTIST, 1944
1944

1944

1944