

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

~~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 South 4th St., Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1650 FNL & 2310 FWL, Sec. 1-8S-31E
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
- SEP 07 1983
O. C. D.
ARTESIA, OFFICE

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other)

X

5. LEASE
NM 0558018

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Union SI Federal

9. WELL NO.

7

10. FIELD OR WILDCAT NAME

Tomahawk SA

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

Unit F, Sec. 1-T8S-R31E

12. COUNTY OR PARISH | 13. STATE

Chaves	NM
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14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4384.3 GR

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

Oil & Gas

ROSWELL, NEW MEXICO

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.)*

4-13-83 Rigged up, pull rods, tubing and pump. Frac'd (via 4-1/2" casing) w/60000 gallons gelled 1% KCL water, 120000# (110000# 20/40 and 10000# 100 mesh) sand. Tailed in w/1000 gallons 15% HCL acid, 110 gallons corrosion inhibitor and 24 ball sealers. Flow well down. Ran tubing, tubing anchor and pumping equipment. Returned well to pumping.
Work completed 4-15-83.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED: [Signature] TITLE: Production Supervisor

DATE 5-25-83

ACCEPTED FOR RECORD (Leave this space for Federal or State office use)

APPROVED BY

(ORIG. SGD.) DAVID R. GLASS

DATE _____

SEP 06 1983

ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED
SEP 12 1983
C.C.D.
HOBBY OFFICE