

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Drawer DD  
Artesia, NM 88210

LEASE

NM 26683

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 Drilling Company
3. ADDRESS OF OPERATOR  
207 South 4th St., Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 990 FSL & 1650 FWL, Sec. 34-12S-31E  
AT SURFACE:  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

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

(other) Production Casing, Perforate, Treat

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dave Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Undes. Queen

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

Unit N, Sec. 34-T12S-R31E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
4214.6' GR

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

RECEIVED  
DEC 15 9 05 AM '83  
BUR. OF LAND MGMT  
ROSWELL DISTRICT

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.)\*

TD 2925'. Ran 69 jts 5-1/2" 15.5# K-55 casing set 2925'. 1-regular guide shoe set 2925'. Insert float set 2885'. Cemented w/750 sacks 50/50 Poz "C", .6% CF-9, .3% TF-4, 2% KCL. Tailed in w/200 sacks Class "C" .5% CF-1, 5#/sack salt. PD 7:30 AM 11-22-83. Bumped plug to 1000 psi, held for 30 minutes, released pressure and float and casing held okay. Cement circulated 25 sacks. WOC 18 hours. WIH and perforated 2760-65' w/10 .41" holes. Acidized perms w/750 gallons 15% MCA acid. Swabbed well. Frac'd well w/15000 gallons gel KCL water, 5000 gallons CO<sub>2</sub>, 16500# 20/40 sand, 7000# 10/20 sand. Flowed well back and swabbed. Set pumping equipment.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED David R. Glass TITLE Production Supervisor DATE 12-13-83

ACCEPTED FOR RECORD

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL: DEC 27 1983

RECEIVED BY  
DEC 28 1983  
O. C. D.  
ARTERIA, OFFICE

RECEIVED  
JAN 3 1984  
O.C.D.  
HOBBS OFFICE