

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 ☒ gas ☐
well 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.) 1980 FSL & 1650 FWL
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:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other)

SUBSEQUENT REPORT OF:

☒
☐
☐
☐
☐
☐
☐
☐

5. LEASE
NM 15896

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
DeLuna Federal

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Undes. Queen

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

Unit K, Sec. 34-T12S-R31E

12. COUNTY OR PARISH Chaves 13. STATE N,

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4233' GR

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

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.)*

Spudded a 12-1/4" hole at 12:00 noon 2-7-84. Ran 9 joints of 8-5/8" 24# J-55 casing set 374'. 1-regular pattern notched guide shoe set 374'. Insert float set 337'. Cemented w/125 sacks Class "C" 3% CaCl₂, 1/4#/sack flocele, 5#/sack kolite. Tailed in w/150 sacks Class "C" 3% CaCl₂, 1/4#/sack flocele. PD 12:15 AM 2-8-84. Bumped plug to 1000 psi, released pressure and float held okay. Cement circulated. WOC. Drilled out 6:15 PM 2-8-84. WOC 18 hours. Nippled up and tested to 1000 psi for 30 minutes, OK. Reduced hole to 7-7/8". Drilled plug and resumed drilling.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Peter W. Chester TITLE Production Supervisor DATE 2-14-84

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

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAR 13 1984

RECEIVED BY
MAR 16 1984
O. C. D.
ARTESIA OFFICE

RECEIVED
MAR 19 1984
O. C. D.
HOBBS OFFICE