

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
P. O. BOX 1980

SUBMIT IN TRIPLICATE*
(Other instructions on back of form.)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-015807

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS FOR NEW MEXICO 88240

(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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Yates Drilling Company

3. ADDRESS OF OPERATOR

105 South 4th Street, Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

330' FSL & 1880' FEL Unit 8

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Garner Federal

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

SE Chaves QN Gas Area Assoc.

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

34-12S-31E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐
☒

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

*(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
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(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.)*

6-14-93 Found hole in casing @ approximately 1220'. TOC by CBL is 2000'.

Propose to try to break circulation through hole, then squeeze with 250 sxs. cement.
If cement does not circ. run temp. survey to determine TOC after squeeze.

Verbal approval of procedures given by Peter Chester, Roswell BLM.

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

SIGNED

John Rhodes

TITLE Petroleum Engineer

DATE 6-15-93

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
PETER CHESTER
DATE

JUN 28 1993

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side

RECEIVED

SEP 11 1963

RECEIVED
OFFICE