

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 Street, Artesia, N.M. 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 330' FNL & 2310' FWL

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:

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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 12 1/4" hole, 11:45 AM, 7/25/84.

Ran 9 joints of 8 5/8" 24# J-55 casing set 371'. 1-regular pattern guide shoe set 371'. Orifice type float set 331'. Cemented w/ 230 sxs. Class "C" 3% CaCl₂, 1/4# sx. flocele in first 100 sxs. Compressive strength of cement - 1250 psi in 12 hrs. PD 2:00 AM, 7/26/84. Bumped plug to 1000 psi, released pressure and float held okay. Cement circulated 40 sxs. WOC. Drilled out 8:00 PM, 7/26/84. WOC 18 hrs. Nipped up and tested to 1000# for 30 min., okay.

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 _____ TITLE Production Clerk DATE 8/8/84

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

APPROVED BY
CONDITIONS OF

PETER W. FOSTER
AUG 13 1984

TITLE

DATE

5. LEASE

NM-015807

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Garner Federal

9. WELL NO.

5

10. FIELD OR WILDCAT NAME

S.E. Chaves Queen Gas

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

Sec. 3-T13S-R31E

12. COUNTY OR PARISH

Chaves

13. STATE

N.M.

14. API NO.

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

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

RECEIVED

AUG 16 1984

OTC
HOBBS OFFICE