

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form DD

Artesia, NM 88210

05. LEASE

NM-015807

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Garner Federal

9. WELL NO.

7

10. FIELD OR WILDCAT NAME

S.E. Chaves Queen Gas Area Assoc.

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

Sec. 27-12S-31E

12. COUNTY OR PARISH 13. STATE

Chaves

N.M.

14. API NO.

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

4432' GL

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 ☐ other ☐
well well

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: 660' FSL & 1980' FEL

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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Production Csg. ☐

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(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.)*

TD 3100'. Ran 74 joints 5 1/2" 14# J-55 LT&C casing set at 3098.54'. Auto fill float shoe set 3099'. Used 420 gals. chemical wash. Cemented with 270 sacks Class "C" with 1% CaCl₂ and 1/4#/sack flocele. Compressive strength of cement 850 psi in 12 hours. PD 12:21 PM, 10-20-84. Bumped plug to 1000# for 30 minutes, released pressure, float and casing held okay. WOC.

WIH and perforated 2987'-2993' with 14 .50" holes with 2 shots per foot.

Frac'd with 750 gals. 15% HCL acid, 15000 gals WF-30 and 1000 SCF CO₂/bbl with 22000# (13000# 20/40 & 9000# 10/20) sand.

Flow testing.

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 Clerk DATE 10/31/84

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

APPROVED BY PETER W. CHESTER TITLE _____

CONDITIONS OF APPROVAL IF ANY:

DATE

NOV 6 1984

RECEIVED BY
NOV 07 1984
O. C. D.
ARTESIA, OFFICE

RECEIVED
NOV 13 1984
O. C. D.
ARTESIA, OFFICE