

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. G. OTHER (Assignment)
R. O. BOX 1030
HOBBS, NEW MEXICO 88240

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 3412

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hodge AEF Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Unit K, Sec. 25-T14S-R30E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

1. NAME OF OPERATOR

Yates Petroleum Corporation

2. ADDRESS OF OPERATOR

105 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

1980' FSL & 1980' FWL, Sec. 25-T14S-R30E

14. PERMIT NO.

API #30-005-21066

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

4013' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☒

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

☐

(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.)*

Verbal permission to P&A well give by Mr. Peter Chester, BLM, Roswell, NM
on 9-4-87 as follows:

Spot plug from 2600-2500' (35 sx minimum)
Spot plug from 1650-1550' (35 sx minimum)
Spot plug from 870-770' (35 sx minimum) Tag this plug.
Set 50' plug at surface.
Install regulation abandonment marker.

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

SIGNED

Peter Chester

TITLE Production Supervisor

DATE 9-4-87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

APPROVED
PETER W. CHESTER

SEP 9 1987

BUREAU OF LAND MANAGEMENT
ROSWell RESOURCE AREA

*See Instructions on Reverse Side