

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-29697

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ledbetter 6 Federal

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

North Young - Bone Spring

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

Sec. 6, T18S, R33E

12. COUNTY OR PARISH

Lea

13. STATE

NM

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Harvey E. Yates Company

3. ADDRESS OF OPERATOR

P.O. Box 1933, Roswell, New Mexico 88202

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

At surface 1650' FSL & 330' FWL

Unit 2

14. PERMIT NO.

30-025-30738

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

3919.8 GL

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

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Spud & csg report

(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.)*

12/27/89 Spud well @ 7:00 am, TD 17 1/2" hole @ 404'
Ran 13 3/8 csg to 404'; Cmt'd w/425 sks "C" w/2% CaCl &
1/4# floceal; Circ 119 sks to pit; WOC-12 hrs
Test BOP-600 psi/30 min-ok

12/30/89 TD 12 1/4" hole @ 2983'; Ran 8 5/8 csg to 2983'
Cmt'd w/1200 sks 65/35 "C" Poz w/2% CaCl, 2% gel, 12.6# Salt &
1/4# floceal + 200 sks "C" w/2% CaCl; Circ 283 sks to pit
WOC-12 hrs; Test BOP-1200 psi/30 min-ok

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

SIGNED

NM Young

TITLE Drilling Superintendent

DATE 1/3/90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 1-5-90

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED

JAN 11 1990

DDO
MORRIS OFFICE