

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE  
(Other instructions on reverse side)

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

SUNDRY NOTICES AND REPORTS ON WELLS 100 93240

(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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER T/A WIW		5. LEASE DESIGNATION AND SERIAL NO. <i>LC-067009-6</i>
2. NAME OF OPERATOR Yates Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 207 S. 4th Street, Artesia, New Mexico 88210		7. UNIT AGREEMENT NAME Young Queen <i>Unit</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) A: surface 660' FSL, 660' FWL, Sec 9-T18S-R32E		8. FARM OR LEASE NAME Young Queen <i>Unit</i>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT Young Queen
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 9-T18S-R32E
		12. COUNTY OR PARISH Lea
		13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Return to production		(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.)\*

This well was completed for production through Queen perforations 3810'-3824' in December 1957. Total depth is 3860'. The well was converted to water injection in the same interval in April 1969. Additional Queen perforations 3797'-3801' were added during April 1969. Injection was discontinued in September 1974. It is now proposed to restore the well as a Queen producer. Additional Queen Pay within the interval 3777'-3797' may be perforated and stimulated. Both casing strings were circulated with cement so no corrective work is expected to be needed. Plans are to clean out the well, open and stimulate additional pay, and place the well on production.

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

SIGNED Dave Borneau TITLE Engineering Manager DATE June 27, 1984

(This space for Federal or State office use)

APPROVED BY R. Ritzelbe TITLE P.E. DATE 7/6/84  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side