

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NEW MEXICO 03240

SUBMIT IN TRIPL
(Other instructions
verse side)

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Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NM-14789-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Young Deep Unit

8. FARM OR LEASE NAME

9. WELL NO.

1

10. FIELD AND POOL OR WILDCAT

N. Young Bone Springs

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

Sec. 10, T-18S, R-32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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 "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection Well

2. NAME OF OPERATOR

Harvey E. Yates Company

3. ADDRESS OF OPERATOR

P. O. Box 1933, Roswell, New Mexico 88201

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

See also space 17 below)

At surface

660' FNL & 660' FWL

14. PERMIT NO.

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

3845.8' GL

16

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

NOTICE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT OFF

PULL OR ALTER CASING

WATER SHUT OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANE

(Other) Pressure Test Casing

(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.*

9/18/86 Pressure test casing to 600# for 15 minutes - held o.k.

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

SIGNED

Wayne S. Ellis

TITLE

Production Analyst

DATE

9/30/86

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 03 1986

Subject to
Like Approval
by State

*See Instructions on Reverse Side