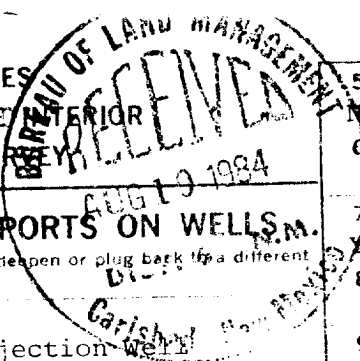


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY



SUNDRY NOTICES AND REPORTS ON WELLS.

(Do not use this form for proposals to drill or to deepen or plug back the a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ well gas ☐ well other 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. See space 17 below.)
AT SURFACE: 660' FNL & 660' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: Same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
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 OR WILDCAT NAME
North Young Bone Springs
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
Sec. 10, T-18S, R-32E
12. COUNTY OR PARISH 13. STATE
Lea NM
14. API NO.
15. ELEVATIONS (SHOW DF, KCB, AND WD)
3845.3'

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) Converting to Injection Well

(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.)*

6/8/84 RIH w/5 1/2" Baker Nickle Plated pkr, profile on/off tool & 2 3/8" Plastic coated thg, set @ 8356'. *W/inhibitor fluid*

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED *[Signature]* TITLE Res. Engineer DATE August 9, 1984

(This space for Federal or State office use)

APPROVED BY *[Signature]* TITLE *[Signature]* DATE 5-21-84

CONDITIONS OF APPROVAL, IF ANY:

Subject to
Like Approval
by State

*See Instructions on Reverse Side

RECEIVED

AUG 24 1984

C.C.D.
HOBBS OFFICE