

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 to a different reservoir. Use Form 9-331-C for such proposals.)

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 88201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FNL & 1980' FEL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) ☐

5. LEASE

NM-16350-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Young Deep Unit

8. FARM OR LEASE NAME

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

North Young Bone Springs

11. SEC. T. R. M. OR B. AND SURVEY OR AREA

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

12. COUNTY OR PARISH 13. STATE

Lea

NM

14. API NO.

15. ELEVATIONS (SHOW OF, KDB, AND WD)
3849' GL

(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.)*

Existing : CIBP @ 8450' w/35' cmt on top.
CIBP @ 5300'.

12/4/84 GIH & perf @ 5260'. Set cmt retainer @ 4000'.
Circ cmt to surface, sting out of retainer & leave 1200' cmt in csg. Pump 100' cmt plug @ 2300', 1600' & 658'. Install dry hole marker. Well P & A @ 12:30 p.m. 12/4/84.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Ray F. [Signature] TITLE Reservoir Eng. DATE 12/12/84

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE 5-6-84
CONDITIONS OF APPROVAL, IF ANY: _____

RECEIVED
MAY 12 1986
C. P.
HOBBS OFFICE