

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
MORRIS, NEW MEXICO 88240
FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.
NM-4364

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
8910180420

8. Well Name and No.
YOUNG DEEP "4" FEDERAL #2

9. API Well No.
30-025-27679

10. Field and Pool, or Exploratory Area
YOUNG BONE SPRING, NORTH

11. County or Parish, State
LEA COUNTY, NEW MEXICO

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Harvey E. Yates Company

3. Address and Telephone No.

P.O. Box 1993, Roswell, NM 88202 1-505-623-6601

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

P, 660' FS & EL OF SEC. 4, T-18S, R-32E

12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other

TESTING OF WOLFCAMP &
BONE SPRING PAY

TYPE OF ACTION

☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log Form.)

13. 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.)

DV @ 9005', TOC @ 2976'.

1. 4-18-95 PERF WOLFCAMP 10,598-610'. ACDZ w/ 3000 GALS 20% I.R.A.S. w/ .5% HF.

2. 4-21-95 ACDZ w/ 10,000 GALS 20% I.R.A.S w/ .5% HF & 8000 GALS OVERFLUSH.
SWAB TEST.

3. 4-25-95 PERF WOLFCAMP 10,512-26'.

4. 4-26-95 SET CIBP @ 10,592'. ACDZ PERFS 10,512-26' w/ 4000 GALS 20% I.R.A.S. w/ .5% HF.
SWAB TEST.

5. 5-2-95 SET CIBP @ 10,490' PLUS 50' CMT. (NEW PBTD @ 10,440').

PERF BONE SPRING FROM 8804-80' (OA). ACDZ w/ 4000 GALS 10% SRA.

6. 5-5-95 FRAC BONE SPRING 8804-80' (OA) w/ 65,000 GALS LFC-2 & 118,920#s 20-40 ECONOPROP.

7. 5-7-95 PUT ON PRODUCTION.

SN @ 8615' TAC @ 8220'.

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

Signed Ray F. Nokes Title PROD. MGR./ ENG.

Date 5/15/95

(This space for Federal or State office use)

Approved by _____ Title _____

Date J. Lara

Conditions of approval, if any.

RECEIVED

1995

OFFICE