

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

RECEIVED

DEC 23 10 37 AM '83

5. LEASE  
NM #11118  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

7. UNIT AGREEMENT NAME  
Young Deep Unit  
8. FARM OR LEASE NAME  
9. WELL NO.  
10  
10. FIELD OR WILDCAT NAME  
N. Young Bonesprings  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 3, T-18S, R-32E  
12. COUNTY OR PARISH 13. STATE  
Lea NM  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3871.4' GR

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 2080' FSL & 1980' FWL  
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 <input type="checkbox"/>    | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/>         | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>       | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/>            | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>   | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/>      | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/>           | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/>               | <input type="checkbox"/> |
| (other) Spud & run csg <input type="checkbox"/> |                          |

(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.)\*

11/23/83 Spudded @ 7:15 a.m. 11/22/83. Ran 17 jts 13 3/8" 54-68# (654') csg to 650', float @ 622'. Cmt w/350 sxs Dowell lite weight 3, 1/4# floceal, 2% CaCl, 200 sx cl "C" w/2% CaCl. PD @ 12:45 a.m. 11/23/83. WOC 18 hrs.

11/30/83 Ran 8 5/8" csg as follows: (Csg set @ 3780', FC set @ 3734')

- 17 jts 32# J-55 725.5'
- 19 jts 28# J-55 762.
- 50 jts 24# J-55 2186.5'
- 3 jts 32# J-55 126.5'

Cmt w/1850 sx Dowell lite-3, 14.8#/sx salt & 1/4#sx cello-flake followed w/300 sx cl "C" 2% CaCl.

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 December 21, 1983

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

ACCEPTED FOR RECORD

*[Signature]*  
JAN 6 1984