

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved
Budget Bureau No. 42-R1424

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 ☒ gas ☐ other ☐
well well
2. NAME OF OPERATOR
Harvey E. Yates Company
3. ADDRESS OF OPERATOR
P. O. Box 1933, Roswell, NM 88201
4. LOCATION OF WELL REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' 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:	SEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other)	<input type="checkbox"/>

5. LEASE
NM-22085
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Amoco 1 Federal
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Und. Bone Springs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 1, T-18S, R-32E
12. COUNTY OR PARISH 13. STATE
Lea NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3906.1 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.)*

11/22/84 Drld 170' Cmt & DV tool, went to 2nd DV tool, found cmt 300' above DV tool.
11/24/84 Drill to 9160'.
11/25/84 Perf 8697' to 8908'. Spot 250 gal 7 1/2% SRA acid.
11/28/84 Frac w/37,000 gal EA Frac-50 & 3% acid. & 8500# 20/40 sd.
11/29/84 GIH w/SN & 2 3/8" tbg to 8607'. Set SN @ 8992'.
11/30/84 Put well on production.
12/18/84 Well started producing oil.

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

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

SIGNED A. Deane TITLE V. P. Operations DATE 12/18/84

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY

TITLE _____

DATE _____