UNITE STATES (November 1983) (Formerly 9-331) DEPARTMENT: THE INTERIOR Verse side: BUREAU.OF: L'AND MANAGEMENT				Expires August 5. LEASE DESIGNATION A NM-4364	Budget Burcan No. 1004-11 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL STREET NM-4364	
	Do not Resents form for preparation for HOS JUNE "APPLICATION FOR	NO REPORTS OF or to deepen or plug bac PERMIT—" for such prop	N WELLS k to a different reservoir. osals.)	6 IF INDIAN, ALLOTTEE	OR TRIBE NAME	
ī	OIL. CO CAR C			7. UNIT AGREEMENT NAM	7. UNIT AGREEMENT NAME	
2.	WE L XX WELL OTHER NAME OF OPERATOR				Young Deep Unit 4 Federal 8. FARM OR LEASE NAME	
3.	Harvey E. Yates Company	9. WBLL NO.	9. WBLL NO.			
4.	P. O. Box 1933, Roswell, New Mexico 88201 Location of Well (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL OR	3 10. FIELD AND POOL OR WILDCAT North Young Bone Springs 11. SBC., T., R., M., OR BLE. AND SURVEY OR ARMA Sec 4, T-18S R-32E 12. COUNTY OR PARISH 13. STATE	
	At surfacé 660' FSL & 1980'	11. SEC., T., R., M., OR BI				
14.	PELMIT NO 15 ELEVATIONS (Show whether DF, RT, GR, etc.)					
		3844.8 GL		Lea	NM	
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or O			or Other Data		
				SEQUENT EMPORT OF:		
	TEST WATER SHUT-OFF PULL OR AL	TER CASING	WATER SHUT-OFF	REPAIRING W	ELL	
	PHACTURE TREAT MULTIPLE C	OMPLETE	FRACTUBE TREATMENT	ALTERING CAS	BING	
	SHOOT OR ACIDIZE ABANDON*		SHOUTING OR ACIDIZING	ABANDONMEN'	r•	
	REPAIR WELL CHANGE PLA	ANS	(Other) RIH w/8	5/8" csg.		
17.	Completion or Recompletion Report and Log form.) DESCRIBE PROPOSED OR COMPLETES OF ERATIONS (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.) 8/30/85 RIH w/64 jts 8 5/8" 24# csg. Set @ 2685'.					
	Cmt w/1260 sx	s. Circ 170 sxs	-	for 30 minutes.		
	•					
18.	SICNED 1. M. M. Youn		ling Superintende	nt DATE 9/4/8	35	
	(This space for Federal or State office use)					
	APPROVED BY CORPTED FOR RECO	RD TITLE		DATE		
	SEP 9 1985	*C	D C: 1			

*See Instructions on Reverse Side

RECTURN

SEP 11 1985

C.C.D. HOBBS OFFICE