

UNITED STATES
DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

Form approved
Budget Bureau No. 1004-0
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NM-4364

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Young Deep Unit 4 Federal

8. FARM OR LEASE NAME

9. WELL NO.

3

10. FIELD AND POOL OR WILDCAT

North Young Bone Springs

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 4 T-18S, R-32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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 and in accordance with any State requirements.*
See also space 17 below)
At surface

660' FSL & 1980' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3844.8 GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) RIH w/13 3/8" csg.

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

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.)*

8/26/85 Spud well @ 8:15 pm 8/26/85.

8/27/85 Ran 11 jts 13 3/8" 54.5# csg. Set @ 450'.

Cement w/450 sxs. PD @ 8:30 am 8/27/85.

Circ 75 sxs to pit. Test csg to 600# for 30 minutes.

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

SIGNED

N.M. Young TITLE Drilling Superintendent

DATE 8/29/85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

SEP 9 1985

*See Instructions on Reverse Side

RECEIVED

SEP 11 1985

CYCL.
HOBBS OFFICE