

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO NM-40456
2. NAME OF OPERATOR Harvey E. Yates Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 1933, Roswell, New Mexico 88202	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FN & EL	8. FARM OR LEASE NAME Chevron 12 Federal
	9. WELL NO. #5
	10. FIELD AND POOL, OR WILDCAT North Young Bone Springs
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T18S, R32E
14. PERMIT NO. 30-025-30682	12. COUNTY OR PARISH Lea
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3881.3 GL	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF	<input type="checkbox"/>	WATER SHUT OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) TD & csg report	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(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.)*

TD @ 9310' on 10/19/89 @ 8:30 pm

10/20/89 Ran 223 jts 5 1/2 17# LT/C. csg, Set @ 9310
Cmtd w/1200 sks filler & 300 sks tail
PD @ 8:45 am 10/21/89
RR @ 2:45 pm 10/21/89

RECEIVED
OCT 20 6 41 AM '89

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

SIGNED <u>NM Young</u>	TITLE <u>Drilling Superintendent</u>	DATE <u>10/27/89</u>
(This space for Federal or State office use)		
APPROVED BY <u>Adm</u>	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side