

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NEW MEXICO OIL CONSERVATION DISTRICT, ALBUQUERQUE
1625 N. French Drive
Hobbs, NM 882

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	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 and Telephone No. P.O. Box 1993, Roswell, NM 88202 1-505-623-6601	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M. or Survey Description) H, 1650' FNL & 660' FEL OF SEC. 12, T-18S, R-32E.	8. Well Name and No. CHEVRON 12 FED. # 6
	9. API Well No. 30-025-30740
	10. Field and Pool, or Exploratory Area NORTH YOUNG BONE SPRING
	11. County or Parish, State LEA CO., NEW MEXICO

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change in Plans
<input type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input checked="" type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> Dispose Water
	<u>ADDITIONAL TESTING IN BONE SPRING & THEN PREMIER</u>	
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)	

13. 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.)

NOTICE OF INTENT TO TEST ADDITIONAL PAY IN BONE SPRING AND IF SUCCESSFUL PUT BACK ON PRODUCTION. IF NOT COMMERCIAL, SET CIBP @ 6775' +/-, ABOVE UPPER MOST PERF (LOCATED AT 6817') PLUS 50' CMT CAP. PERFORATE AND TEST PREMIER AT APPROX. 5000' AND IF COMMERCIAL PUT ON PRODUCTION.

WORK PIT WILL BE DUG FOR OPERATIONS AND TESTING. PIT WILL BE CLOSED UPON COMPLETION OF OPERATIONS AND TESTING.

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

Signed Ray F. Nokes Title PROD. MGR./ ENG. Date 8/17/99

(This space for Federal or State office use)

Approved by Ray F. Nokes Title PETROLEUM ENGINEER Date AUG 26 1999

Conditions of approval, if any:

AUG 26 1999

This 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

* See Instruction on the Reverse Side

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