BUREAU OF LAND MANAGEMENT       P.O. Box 1980       Expires: March 31, 1993         SUNDRY NOTICES AND REPORTS ON WELL HODDS, NM 88241       5. Lease Designation and Serial No.         Do not use this form for proposals to drill or to deepen or reentry to a different reservoir       6. If Indian, Alloite or Tribe Name         SUBMIT IN TRIPLICATE       7. If Unit or CA, Agreement Designation         1. Type of Well       Soil Well       Other		STATES (ما UNI)	·	FORM APPROVED
Constrained C	(June 1990)	DEPARTMENT OF THE INTERIOR	N.M. Oil Cons. Divisi	DN Budget Bureau No. 1004-0135
SUNDRY NOTICES AND REPORTS ON WELLHODDS, NM 88241       Is the total intervent in the intervent in the deepen or reentry to a different reservoir       Is the intervent interven		BUREAU OF LAND MANAGEMENT	P.O. Box 1980	Expires: March 31, 1993
Do not Use This form for proposals to drail or to deepen or reserving     Let "APPLICATION NOR PREMITY" (in such proposals     SUBMIT IN TRIPLICATE     SUBMIT IN TRIP	st	JNDRY NOTICES AND REPORTS ON WE	LL Hobbs, NM 88241	-
	Do not use this form	for proposals to drill or to deepen or reentry	to a different reservoir	6. If Indian, Allotte or Tribe Name
Solid Well       Gas Well       Other       8911180-20         Name of Greated       Harvey E. Vates Company       Null Sum and No.         Address and Totephane No.       P.O. Busy of Greated Harvey E. Vates Company       Null Sum and No.         Address and Totephane No.       D. Address and Totephane No.       D. Address and Sum and No.         P.O. Basy S. Roswell, NM 88202 1-505-623-6601       In Field and the traphenitory Area YoUNG BONE SPENCE, NORTH         1560° FSL & 330° FEL.       L. K. M. or Survey Description       IL County of Nather Spectra Property Testing Area         1560° FSL & 330° FEL.       LEA COUNTY, NM       EACOUNTY, NM         2       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF ACTION       Void Negative Structure         Subardeents toper       County field Plane         Subardeent toper       Note Constraints         Subardeent toper       Soladoreent         Subardeent toper Subard toper Subar		SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
Harvey E. Yates Company       Notice and solution and solution of the		Vell Other		8910180420
A Address and Lingboor Nu P.O. Box 1993 , Roswell, NM 88202 1-505-623-6601 U. Pedi and Pod. # Sploratey Area VOING BOX 5993 , Roswell, NM 88202 1-505-623-6601 U. Pedi and Pod. # Sploratey Area VOING BOX 5993 , U. R. M. et Survey Description Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Location of Well (Parkage, See, 1, 16, M. et Survey Description) Well Comparison of Note Survey of Network State Edge and Advancement Survey of Network State Edge and Advancement Survey of Network State Edge and Attempt Casting Report Description Descr	2. Name of Operator			8. Well Name and No.
3. Address and Toppare Na     30-025-30866       P.O. Box 1993. , Roswell, NM 88202 1-505-623-6601     14. Field and Fed. et Exploratory Area       1.1 called Well Fedelag, Ster, T., R., M. et Survey Description     1650 FSL, & 330 FEL       1.5 C. 4, T-18S, R-32 E     11. County or Partia, Ster       12. Celled Well Fedelag, Ster, T., R., M. et Survey Description     15. County or Partia, Ster       15.00 FSL BMISSION     TYPE OF ACTION       12. Celled K APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION     TYPE OF ACTION       13. Subsequent Report     Phaging Back       15. Subsequent Report     Phaging Back       15. Subsequent Report     Phaging Back       16. Statistic quent     Statistic quent       16. Statistic quent     Statistic quent       17. Statistic quent     Statistic quent       18. Subsequent Report     Phaging Back       19. Statistic quent     Statistic quent       10. Statistic quent     Statistic quent   <	Harvey E. Yates C	lompany		YOUNG DEEP UNIT # 12
P.O. Box 1993 , Roswell, NM 88202 1-505-623-6601  U. Fuel and Pole of Exploring Pole of Explore Pole P		· · · · · · · · · · · · · · · · · · ·		9. API Well No.
Lection of Weil Poolege, Sec. 1, R., M. or Survey Description) 1650° FNJ, & 330° FEL 1, SEC: 4, T-185, R-32E LEA COUNTY, NM  C CHECK APPROPRIATE BOX(5) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION C CHECK APPROPRIATE BOX(5) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION C CHECK APPROPRIATE BOX(5) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Subsequent Report Subsequent Report Subsequent Report Subsequent Report Subsequent Report SUZ OFF PERFS Using Repair Other SUZ OFF PERFS Using Repair C and the predict data, add give performed data, indiage entities of all and the social C completion of Recompletion Report and Ling form. C and the performed data, add give performed data, indiage entities of all and performed data, add give performed data, indiage entities of all and the social C additions of Recompletion Report and Ling form. C additions of all and the social give performed data, indiage entities of all and the social C additions of Recompletion Report and Ling form. C additions of Recompletions Repor	•	Deswell NM 99202 1 505 (22 ((01		30-025-30866
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1650° FSL & 330° FEL       LEA COUNTY, NM         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION         12. OHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         12. Observed finemer       Isondammert         13. Subsequent Reper       Isondammert         14. Brend State affect in the second state of the second st	4. Location of Well (Footage, Sec., T., R	M or Survey Description)		
				11. County or Parish, State
TYPE OF SUBMISSION       TYPE OF ACTION         Notee of lattert       Abandomment         Recompletion       Plugging Back         Casting Repair       Plugging Back         Casting Repair       Plugging Back         Casting Repair       Plugging Back         Subsequent Repair       Plugging Back         Casting Repair       Plugging Back         Casting Repair       Plugging Back         Casting Repair       Plugging Back         Other       SQZ OFF PERFS         Other       SQZ PERFS 8228-8318' (OA) w/ 98 SKS CL "H" w/ .4% HALAD 9 TO 30000#.         10-12-96 DRILL OUT CMT AND TEST. HELD OK.       10-12-96 ORILL OUT CMT AND TEST. HELD OK.         10-11-96 RUN PUMP AND RODS. PUT BACK ON PRODUCTION. (PERFS 8470-8764' (OA)).       4.1 hereby certify thus the bregating forwa and certified         Stated       Mar P. NOKES       Tate       PROD. MGR / FNG.       Date 10/14/96         (this space for Federal et State office aus)       Tate       PROD.	I, SEC. 4, T-188, R-32	E		LEA COUNTY, NM
TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Interif       Recompletion         Subsequent Report       Plaging Back         Change In Plans       Non-Rettine Fracturing         Water Statu-Of       Non-Rettine Fracturing         Water Statu-Of       Non-Rettine Fracturing         Other       SQZ OFF PERFS         SQZ PERFS 8228-8318' (OA) w/ 98 SKS CL "H" w/ .4% HALAD 9 TO 30000#.         10-12-96 SQZ PERFS 8228-8318' (OA) w/ 98 SKS CL "H" w/ .4% HALAD 9 TO 30000#.         10-12-96 RUN BOTTOM HOLE ASSEMBLY. SN @ 8334' & TAC @ 7696'.         10-11-96 RUN PUMP AND RODS. PUT BACK ON PRODUCTION. (PERFS 8470-8764' (OA)).         Image: State of the state office and    (the state of the state office and state	2. CHECK APPROPR	IATE BOX(s) TO INDICATE NATURE	OF NOTICE, REPORT, OF	R OTHER DATA
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Control of the formation of the for		Recompletion	New Constructi	on
Imail Abandoment       Attering Casing       Conversion to Injection         State       SQZ OFF PERFS       Dispose Water         Other       SQZ OFF PERFS       Other         Other       Completed Operations (Courty sate all perflored deash, and give perflored dates, lackuling estimated date of suring up projosed work. If well is directionally defind, give whorks to cations and measured and trac vertical depths for all markers and zones perflored to this work.)         9-27-96 SQZ PERFS 8228-8318' (OA) w/ 98 SKS CL "H" w/.4% HALAD 9 TO 3000#.         10-12-96 DRILL OUT CMT AND TEST. HELD OK.         10-12-96 RUN BOTTOM HOLE ASSEMBLY. SN @ 3334' & TAC @ 7696'.         10-11-96 RUN PUMP AND RODS. PUT BACK ON PRODUCTION. (PERFS 8470-8764' (OA)).         4.1 hereby certify dual the bregoing forture and courts         Signed       AVEF. NOKES         Signed       Mark F. NOKES         Ying       PROD. MGR/FNG.       Date _10/14/96	X Subsequent Report		Non-Routine Fr	acturing
X       Other       SQZ OFF PERFS	Final Abandoment			
Cive: Expert results of multiple completion on Well Completion or Recompletion Report and Log Form.)  O Describe Proposed of Completed Operations (Civerty state all particlent details, and give particlent dots, including estimated date of starling are proposed work. If well is directionally defiled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)  9-27-96 SQZ PERFS 8228-8318' (OA) w/ 98 SKS CL "H" w/ .4% HALAD 9 TO 30000#. 10-172-96 DRILL OUT CMT AND TEST. HELD OK. 10-10-96 RUN BOTTOM HOLE ASSEMBLY, SN @ 8334' & TAC @ 7696'. 10-11-96 RUN PUMP AND RODS. PUT BACK ON PRODUCTION. (PERFS 8470-8764' (OA)).  4.1 hereby certify that the pregoting by true and core for signed Approved by RAY F. NOKES Tite PROD. MGR./ ENG. Date 10/14/96  (This space for Federal or State office are: Approved by Itle.			Conversion to I	njection
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