

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"/>	7. UNIT AGREEMENT NAME <u>Young Deep Unit</u>
2. NAME OF OPERATOR <u>Harvey E. Yates Company</u>	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR <u>P. O. Box 1933 Roswell, New Mexico 88201</u>	9. WELL NO. <u>#12</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>1650' FSL & 330' FEL</u>	10. FIELD AND POOL, OR WILDCAT <u>North Young Bone Springs</u>
14. PERMIT NO. <u>30-025-30866</u>	11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA <u>Sec. 4, T18S, R32E</u>
15. ELEVATIONS (Show whether DT, RT, GR, etc.) <u>3863.5</u>	12. COUNTY OR PARISH <u>Lea</u>
	13. STATE <u>NM</u>

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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <u>Notice of Transporting</u> <input checked="" type="checkbox"/>	

(Other) _____

(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.) *

This is to inform your office that the above captioned well was given verbal approval by Shannon Shaw from the BLM office in Carlsbad, on 5/31/90 for Pride Pipeline Co. to haul oil from frac tanks located on the Young Deep Unit #12 location, to the Anderson Ranch Station 74 lact.

RECEIVED
JUN 4 10 35 AM '90
CARLSBAD OFFICE
AREA HEADQUARTERS

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

SIGNED Micky Young N.M. YOUNG

TITLE Drilling Superintendent

DATE 5/31/90

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED

JUN 20 1990

OCD
HOBBS OFFICE