

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP  
(Other instruction  
verse side)

DATE  
re

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-2593
2. NAME OF OPERATOR Yates Petroleum Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 105 South Fourth Street - Artesia, NM 88210	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' FSL & 330' FWL	8. FARM OR LEASE NAME Ed Powell IG Federal
	9. WELL NO. 1
	10. FIELD AND POOL, OR WILDCAT Leonard Queen South
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 18-T26S-R38E
14. PERMIT NO.	12. COUNTY OR PARISH Lea
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3002' GR	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"/>	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 PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) Temporary Suspend Production ☒ (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.) \*

1. This lease is in its extended term.
2. There are only two wells on this lease; Ed Powell IG Federal #1 and Ed Powell IG Federal #2, both of which are small producers.
3. The wells on this lease are stripper wells.
4. This well is capable of production in paying quantities, but failure to suspend the production will lead to premature abandonment, due to the low prices at this time.
5. The date of last production was on April 30, 1987, with production of 1 barrel oil.  
NOTE: This was a months production. This well is only produced 4 days a month.  
The Ed Powell IG Federal #1 and #2 flow into one battery.

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

SIGNED Theresa J. Jorgensen TITLE Regulatory Secretary DATE May 22, 1987

(This space for Federal or State office use)  
Orig. Sgd. Under N. I. Jorgensen

APPROVED BY Arlene J. Jorgensen TITLE Acting Area Manager DATE 5-29-87

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

RECEIVED  
JUN 1 1987  
OCD  
HOBBS OFFICE