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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-103  
Revised 10-1-79

MAR - 1 1982

O. C. D.

ARTESIA, OFFICE

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG 3998

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Yates Petroleum Corporation			8. Farm or Lease Name Hogback PO State
Address of Operator 207 South 4th St., Artesia, NM 88210			9. Well No. 1
Location of Well UNIT LETTER C, 660 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 20 TOWNSHIP 19S RANGE 24E NMPM.			10. Field and Pool, or Wildcat West Hoag Strawn
15. Elevation (Show whether DF, RT, GR, etc.) 3779' KB; 3764' GR			12. County Eddy

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Well is marginal in present Strawn perforations. We propose to perforate additional Strawn pay at 7825-30 and stimulate as needed and return well to production from all Strawn perforations.

8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

CHIEF <u>[Signature]</u>	TITLE <u>Engineering Secretary</u>	DATE <u>2-26-82</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR, DISTRICT E</u>	DATE <u>MAR - 8 1982</u>
CONDITIONS OF APPROVAL, IF ANY:		