

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

clsf

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.  
30-015-26720

5. Indicate Type of Lease  
STATE  FEE

6. State Oil & Gas Lease No.

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

7. Lease Name or Unit Agreement Name

Albert AJH

1. Type of Well:  
OIL WELL  GAS WELL  OTHER  RECEIVED

8. Well No.  
1

2. Name of Operator  
YATES PETROLEUM CORPORATION ✓ OCT 25 1991

9. Pool name or Wildcat  
Und. Morrow

3. Address of Operator  
105 South 4th St., Artesia, NM 88210 O. C. O.  
ARTESIA OFFICE

4. Well Location  
Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line  
Section 21 Township 20S Range 24E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3717' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK  PLUG AND ABANDON   
TEMPORARILY ABANDON  CHANGE PLANS   
PULL OR ALTER CASING   
OTHER:

REMEDIAL WORK  ALTERING CASING   
COMMENCE DRILLING OPNS.  PLUG AND ABANDONMENT   
CASING TEST AND CEMENT JOB   
OTHER:

12. 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.

Spudded 26" hole 9:00 PM 10-20-91 with Rathole Service. Set 40' of 20" conductor.  
Notified Mike Stubblefield, NMOCD, Artesia, NM. Resumed drilling 14-3/4" hole 8:00 AM  
10-23-91.

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

SIGNATURE Juanita Goodlett TITLE Production Supervisor DATE 10-24-91

TYPE OR PRINT NAME Juanita Goodlett TELEPHONE NO. 505/748-1471

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

NOV - 5 1991

CONDITIONS OF APPROVAL, IF ANY:

1943

1944

1945