Submit 3 Copies to Appropriate District Office

State of New Mexico Energ_ inerals and Natural Resources Department

Form	C-103
Revis	rd 1-1-89

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DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION J P.O. Box 2088	CELVED WELL APINO.
DISTRICT II Santa Fe, New Mexico 8750 P.O. Drawer DD, Artesia, NM 88210	30-015-26591 5. Indicate Type of Lease
	N-9'91 STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. V-120
SUNDRY NOTICES AND REPORTS ON WELLS	ESIA, OFFICE
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
I. Type of Well: OIL GAS WELL X WELL OTHER	Medano VA State
2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1	8. Well No.
YATES PETROLEUM CORPORATION (505) 748-1 3. Address of Operator	9. Pool name or Wildcat
105 South 4th St., Artesia, New Mexico 88210	Wildcat Delaware
4. Well Location	1650 West
Unit Letter F: 2310 Feet From The North	Line and 1650 Feet From The West Line
Section 16 Township 23-S Range	31-E NMPM Eddy County
10. Elevation (Show whether DF, R 3349' GR	KB, RT, GR, etc.)
	re of Notice Percet or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON RE	MEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS CO	MMENCE DRILLING OPNS. X PLUG AND ABANDONMENT
PULL OR ALTER CASING CAS	SING TEST AND CEMENT JOB X
OTHER:	HER:
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give work) SEE RULE 1103.	pertinent dates, including estimated date of starting any proposed
Spudded 26" hole with rathole 3:15 PM 1-2-91. Notifed Johnny Robinson, NMOCD, Artesia, NM, of Resumed drilling 17½" hole 6:30 PM 1-4-90. Ran set 525'. Guide shoe set 525', insert float se (yield 1.32, wt 14.8). PD 2:25 PM 1-5-91. Bum 150 sx cement. WOC. Drilled out 8:25 AM 1-6-9 psi for 30 minutes, OK. Reduced hole to 11", r	spud. 12 joints 13-3/8" 54.5# J-55 ST&C casing t 478'. Cemented w/625 sx "C" + 2% CaCl2 ped plug, float held okay. Circulated 1. WOC 18 hours. NU and tested to 500
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIONATURE Canalla Doublew TITLE P.	roduction Supervisor DATE 1-8-91
TYPEOR PRINT NAME Juanita Goodlett	TELEPHONE NO. 505/748-1471
ORIGINAL SIGNED BY MIKE WILLIAMS APPROVED BY SUPERVISOR, DISTRICT IS TITLE	JAN 1 4 1991