| | | | F | | |
|--|----------------------------------|--|------------------------|-----------------------|---------------|
| Submit 3 Copies To Appropriate District State of New Mexico | | | | Form C-10 | 03 |
| Office Energy Minerals and Natural Resources | | | | Revised March 25, 19 | 199 |
| <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 | <u>~</u> | | | | |
| District II Sill Such First Actor NM 88210 OIL CONSERVATION DIVISION | | | 30-015-27099 | | |
| off South First, Artesia, Nivi 66210 | | | 5. Indicate Type o | | |
| histrict III 1220 South St. Francis Dr. | | | STATE [> | | |
| District IV Santa Fe, NM 87505 | | | 6. State Oil & G | as Lease No. | |
| 1220 S. St. Francis Dr., Santa Fe, NM | | | | | |
| 87505 | SEC AND DEPORTS ON WI | CIIC | 7 Lease Name or | Unit Agreement Nam | e · |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | /. Lease Ivallie of | Omt rigicoment rum | ٠. |
| DIFFERENT RESERVOIR. USE "APPLICA | ATION FOR PERMIT" (FORM C-1 | 01) FOR SUCH | BOYD X STATE | | |
| PROPOSALS.) | | | BOIDXSIAIL | • | |
| 1. Type of Well: | | 0141516772 | | | |
| Oil Well X Gas Well | Other | 2131415167778 | 0 11 11 11 | <u> </u> | |
| 2. Name of Operator | / / / / / | ₹ ₹ | 8. Well No. | | |
| YATES PETROLEUM CORF | PORATION () | Maria T | 3_ | | |
| 3. Address of Operator | . Š | R50- 2003 | 9. Pool name or | | |
| 105 SOUTH 4TH STREET, A | RTESIA, N.M. 88210 🖔 - | OCHECEIVED | DAGGER DRAW | / U/PENN, N. | |
| | ୂର୍ | ARTESIA A | M/ | | |
| 4. Well Location | /3. | . ~ ~ ~ ^ ^ |)/ | | i |
| | | (1967) | / | | |
| Unit Letter J: 1980 | feet from the <u>SOU</u> | H LEndine and 19 | 80 feet from the | e <u>EAST</u> line | |
| | | The same of the sa | | | |
| Section 29 | Township 19S | Range 25E | 1 11111 | DY County | / Sometica |
| | 10. Elevation (Show wheth | er DR, RKB, RT, GR, e | tc.) | 人名英格兰人 英格兰人 | |
| The second secon | | | | 100 PM | |
| 11. Check A | ppropriate Box to Indica | te Nature of Notice. | Report or Other I | Data | |
| NOTICE OF IN | | | SEQUENT REPORT OF: | | |
| | | | | ALTERING | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WO | RK | CASING [| |
| TEN (DODADII V ADANDON | CHANCEDIANS | COMMENCE DE | RILLING OPNS. | PLUG AND | |
| TEMPORARILY ABANDON | CHANGE PLANS | <u> </u> | | ABANDONMENT | |
| PULL OR ALTER CASING | MULTIPLE | CASING TEST A | √ND | | |
| | COMPLETION | CEMENT JOB | | | |
| OTHER DISCONNECT PIPLINE | | OTHER: | | [| |
| Describe proposed or completed op | perations. (Clearly state all pe | rtinent details, and give | pertinent dates, inclu | ding estimated date o | f |
| starting any proposed work). SEE I | RULE 1103. For Multiple Co | mpletions: Attach well | bore diagram of prop | osed completion or | |
| recompilation. | • | • | | | |
| BP Pipeline will be disconnec | ting the pipeline system | effective April 1, 20 | 03. Oil sales will be | trucked | |
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| | | THE C | | | |
| I hereby certify that the information | above is true and complete t | o také best of my knowle | edge and belief. | | |
| rice of certify that the information | | cor | | | |
| SIGNATURE Michelle | June 7 TITLE RE | GULATORY COMPL | IANCE MGR DATE | MARCH 13, 2003 | |
| | | | | | |
| Type or print name MICHELLE T. | | | Talambana Ma 5 | NE 740 1471 | |
| | AYLOR | | Telephone No. 5 | 003-740-1471 | |
| (This space for State use) | AYLOR *** | | retepnone No. 3 | 003-740-1471 | |
| • | *** | | Telephone No. | | |
| (This space for State use) APPPROVED BY Conditions of approval, if any: | AYLOR *** TIT | LE | Telephone No. 3 | DATE | |