

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-79

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SANTA FE	<input checked="" type="checkbox"/>
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

RECEIVED BY
JUL 28 1986

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG 4920	

SUNDY 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 FORM C-101 FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Yates Petroleum Corporation		8. Farm or Lease Name Ibis XU State
3. Address of Operator 105 South 4th St., Artesia, NM 88210		9. Well No. 1
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM <u>East</u> LINE, SECTION <u>23</u> TOWNSHIP <u>9S</u> RANGE <u>26E</u> NMPM.		10. Field and Pool, or WHdcat Gas Foor Ranch Pre-Permian
15. Elevation (Show whether DF, RT, GR, etc.) 3794.8' GR		12. County Chaves

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input 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"/>	OTHER <input checked="" type="checkbox"/> Frac'd well.

17. 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.

7-23-86. Frac'd (via 2-3/8" tubing) perforations 5896-5910' w/80000 gals 40# gelled
3% acid and 103000# 20/40 sand. Recovering load.

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

SIGNED Les A. Clements TITLE Production Supervisor DATE 7/25/86
Original Signed By
Les A. Clements TITLE Supervisor District 11 DATE JUL 30 1986
APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

