

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

RECEIVED BY
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O. C. D.
ARTESIA OFFICE

Form C-103
Revised 10-1-79

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.)

OIL
WELL ☐

GAS
WELL ☒

OTHER

Name of Operator

Yates Petroleum Corporation

Address of Operator

207 South 4th St., Artesia, NM 88210

Location of Well

UNIT LETTER C 660 FEET FROM THE North LINE AND 1980 FEET FROM
THE West LINE, SECTION 17 TOWNSHIP 6S RANGE 26E NMPM.

5a. Indicate Type of Lease

State ☐

Fee ☒

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name

Caudill RZ

9. Well No.

5

10. Field and Pool, or Wildcat

Und. Pecos Slope Abo

15. Elevation (Show whether DF, RT, GR, etc.)

3675' GR

12. County

Chaves

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☒

CASING TEST AND CEMENT JOB ☒

OTHER ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

Spudded 14-3/4" hole 7:00 PM 11-26-83. Ran 23 jts 10-3/4" 40.5# casing set 900'. 1-Texas Pattern notched guide shoe set 900'. Insert float set 859'. Cemented w/400 sacks Pace-setter Lite, 3% CaCl2. Tailed in w/300 sacks Calss "C" 2% CaCl2. Compressive strength of cement - 1250 psi in 12 hrs. PD 11:30 PM 11-28-83. Bumped plug to 1000 psi, released pressure and float held okay. Cement circulated 25 sacks. WOC. Drilled out 5:30 PM 11-29-83. WOC 18 hrs. NU and tested to 1000 psi for 30 minutes okay. Reduced hole to 7-7/8". Drilled plug and resumed drilling.

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

SIGNED Leslie A. Clements

TITLE Production Supervisor

DATE 12-1-83

Original Signed By

Leslie A. Clements

APPROVED BY _____

TITLE Supervisor District II

DATE DEC 05 1983

CONDITIONS OF APPROVAL, IF ANY: