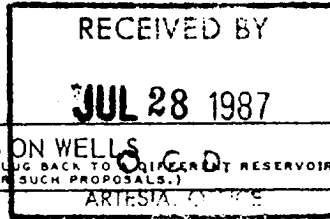


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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



5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
LG-4429

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A QUANTITATIVE 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

105 South Fourth Street - Artesia, NM 88210

Location of Well

UNIT LETTER H, 1780 FEET FROM THE North LINE AND 660 FEET FROM

THE East LINE, SECTION 11 TOWNSHIP 9S RANGE 26E NMPM.

7. Unit Agreement Name

Desert Rose Unit

8. Farm or Lease Name

9. Well No.

1

10. Field and Pool, or Wildcat

Pecos Slope Abo

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

3824' GR

12. County

Chaves

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 ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CHANGE PLANS ☒

CASING TEST AND CEMENT JOBS ☐

OTHER ☐

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.

We would like to change our casing program on the application for permit to drill to read as follows:

FROM:

12-1/4" hole 8-5/8" casing 24# J-55 Set at 1000' with 550 sacks, circulated

TO:

12-1/4" hole 8-5/8" casing 24# J-55 Set at 850' with 550 sacks, circulated

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

SIGNED Les A. Clements TITLE Regulatory Secretary DATE July 28, 1987

Original Signed By
Les A. Clements

APPROVED BY _____ TITLE _____ DATE AUG 10 1987

CONDITIONS OF APPROVAL, IF ANY:

Supervisor District II