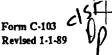
Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department



DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION P.O. Box 2088

		'
WI	ELL API NO.	
•	Indicate Tyme of Leace	

	1.0. Dox 200				
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico		5. Indicate Type of Lease STATE X FEE		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	S	EP 1 8 1992	6. State Oil & Gas Lease No. B-8617		
DIFFERENT RESERVOIR.	AND REPORTS ON WELL LIS TO DRILL OR TO DEEPEN USE "APPLICATION FOR PER OR SUCH PROPOSALS.)	ORPLUG BACK TO A	7. Lease Name or Unit Agreement Name		
1. Type of Well: ORL OAS WELL X WELL	OTHER		Spurck F State		
2. Name of Operator			8. Well No.		
Yates Drilling Company	v - 🗸		4		
3. Address of Operator	· 1		9. Pool name or Wildcat		
105 South 4th Street,	Artesia, NM 88210		Red Lake		
4. Well Location					
Unit Letter <u>C</u> : 990 F	eet From The North	Line and231	O Feet From The West Line		
Section 15 T	ownship 17S Rar		NMPM Eddy County		
	10. Elevation (Show whether I	OF, RKB, RT, GR, etc.)			
<u> </u>	3540' DF				
11. Check Appro	opriate Box to Indicate N	Nature of Notice, Re	port, or Other Data		
NOTICE OF INTENT	_	SUBSEQUENT REPORT OF:			
K31132 31 11112111		OODOEGOENT NEI ONT OI .			
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🔲	REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB			
OTHER: Change of Operator	<u> </u>	OTHER:			
12. Describe Proposed or Completed Operations (Completed Operation	learly state all pertinent details, an	d give pertinent dates, includ	ling estimated date of starting any proposed		
Effective date 9/1/92 0	perator changed from	n S.P. Yates 105 South Artesia, NN			
O ⁻	perator changed to	Yates Drill 105 South A Artesia, NN			

I hereby certify that the informatic	on above is true and complete to the best of my knowled	1	Production Clerk	DATE 9-15-92	_
TYPE OR PRINT NAME				TELEPHONE NO.	
(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS	:		SFP 2 1 199	<u> </u>
APPROVED BY	SUPERVISOR, DISTRICT I	- mle		DATE	_

CONDITIONS OF APPROVAL, IF ANY: