NO. OF CUPILS RECEIVED	9 F F		Form C-103
DISTRIBUTION	KEU	EIVED	Supersedes Old
SANTA FE	NEW MEXICO OIL CONS	ERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE	JAN	1 7 1979	
U.S.G.S.		- (607 g	5a. Indicate Type of Lease
LAND OFFICE	Π.	C . (2)	State X Fco
OPERATOR	ARTES	LA. OFFICE	5. State Oil & Gas Lease No.
			OG 181
SUNDRY (DO NOT USE THIS FORM FOR FROM USE "APPLICATION OF THE PROPERTY OF THE	Y NOTICES AND REPORTS ON	WELLS	
1.	SA FOR PERMIT -** (FORM C-101) FOR SUCI	PROPOSALS.)	7. Unit Agreement Name
OIL CAS X	OTHER-		
2. Name of Operator			8, Farm or Lease Name
Yates Petroleum Co	orporation ;		Lucas Store "JZ" St.
3. Address of Operator	;		9. Well No. Com
207 South Fourth S	Street - Artesia, NM	88210	1 1
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER E	1980 FEET FROM THE North	LINE AND 860 FEET FROM	Und. Empire Penn
	•		
THE West LINE, SECTION	N 23 TOWNSHIP 17S	RANGE 28E NMPM	
	15. Elevation (Show whether i		12. County
		3693' GR	Eddy
Check A NOTICE OF IN	appropriate Box To Indicate N TENTION TO:	~	ner Data T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ASANDONMENT X
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	. —
	. (-)	OTHER	
OTHER			
	erations (Clearly state all pertinent deta	ils, and give pertinent dates, including	estimated date of starting any proposed
work) SEE RULE 1103.		-handoned no follow	
TD 10690'. This	well was plugged and	abandoned as lollow	
1. 10350-10250'	35 sacks		
1. 10350-10250' 2. 9200-9050'	50 sacks		
3. 7950-7850'	35 sacks	•	
4. 6970-6820'	50 sacks		
5. 5930-5830'	35 sacks	•	
6. 3920-3720'	70 sacks		
7. 2650-2500'	50 sacks		
8. 2300-2200'	35 sacks		
10' surface plug		d was placed between	each plug.
Dry hole marker h	as been installed. '	The location will be	cleaned, pits
filled and levelle	ed and ready for insp	pection. PLUGGED AN	ID ABANDONED
1-12-79.			
			· ·
•	`	•	
-			
		•	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
7,	above is true and complete to the best of	f my knowledge and belief.	
	above is true and complete to the best of	f my knowledge and belief.	
SIGNED Stratus	1	of my knowledge and belief. ological Secretary	DAYE 1-16-79

TITLE ____

DATE ___

CONDITIONS OF APPROVAL, IF ANYL

APPROVED BY