

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 208
SANTA FE, NEW MEXICO 87501

RECEIVED BY
AUG 4 - 1987
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No. LG 2346	

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.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER- <u>Recompletion</u>		7. Unit Agreement Name
2. Name of Operator <u>Yates Petroleum Corporation</u>		8. Farm or Lease Name <u>Armstrong KS State Com</u>
3. Address of Operator <u>105 South 4th St., Artesia, NM 88210</u>		9. Well No. <u>1</u>
4. Location of Well UNIT LETTER <u>I</u> , <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>560</u> FEET FROM THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>17S</u> RANGE <u>26E</u> N11PM.		10. Field and Pool, or WHdcat <u>Penn</u> <u>Und. Kennedy Farms Permo-</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3355.3' GR</u>		12. County <u>Eddy</u>

16. 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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER <u>Plugback, Perforate, Treat</u> ☒

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 1703.

CORRECTED LEASE NO. LG 2346.

7-29-87. Set CIBP at 8350' with 35' cement on top.
7-30-87. WIH and perforated 6614-6930' w/18 .42" holes as follows:
6925-30' (6 holes; 6663-70' (8 holes); 6614-17' (4 holes).
Acidized perms 6925-30' w/1000 gals acid, 6663-70' with 1250
gals acid and 6614-17' w/750 gals acid. Total 3000 gals 15%
NEFE acid with ball sealers.

Post ID-2
8-14-87
P + A man.

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

SIGNED <u>Les A. Clements</u>	TITLE <u>Production Supervisor</u>	DATE <u>8/3/87</u>
APPROVED BY <u>Supervisor District II</u>	TITLE <u></u>	DATE <u>AUG 11 1987</u>
CONDITIONS OF APPROVAL, IF ANY:		