

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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**OIL CONSERVATION DIVISION**  
**RECEIVED BY** O. BOX 2088  
**SANTA FE, NEW MEXICO 87501**  
**JUL 5 1985**  
**O. C. D.**  
**ARTESIA, OFFICE**

Form C-103  
Revised 10-1-78

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

**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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection Well		7. Unit Agreement Name
Name of Operator Yates Petroleum Corporation ✓		8. Farm or Lease Name Gissler AV
Address of Operator 207 South 4th St., Artesia, NM 88210		9. Well No. 41
Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>23</u> TOWNSHIP <u>17S</u> RANGE <u>25E</u> NMPM.		10. Field and Pool, or Wildcat Eagle Creek SA
15. Elevation (Show whether DF, RT, GR, etc.) 3505' GR		12. County Eddy

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Acidize injection well</u> <input checked="" type="checkbox"/>

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 1103.

7-3-85 RU and acidized perfs 1316-1413' w/2000 gals 15% NEFE acid and ball sealers. Well ready to return to injection.

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

SIGNED [Signature] TITLE Production Supervisor DATE 7-5-85

APPROVED [Signature] TITLE OIL AND GAS INSPECTOR DATE JUL 09 1985

CONDITIONS OF APPROVAL, IF ANY:

