

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-015-25183

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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.)

1. Type of Well:
OIL WELL ☐

GAS WELL ☒

OTHER ☐ Recompleted

2. Name of Operator

YATES PETROLEUM CORPORATION

3. Address of Operator

105 South 4th St., Artesia, NM 88210

MAR 03 '89

7. Lease Name or Unit Agreement Name

Powell-Kissinger BS

8. Well No.

2

9. Pool name or Wildcat

Eagle Creek Strawn

4. Well Location

Unit Letter 0 : 990 Feet From The South Line and 1650 Feet From The East Line

Section 33

Township 17S

Range 25E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3552' GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Set CIBP, perforate, treat ☒

12. 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.

2-27-89. Set CIBP at 8300' w/35' cement cap. Perforated 7701-06' and 7551-55' w/11 .40" holes (1 SPF). Acidized perms 7101-7706' w/1500 gals 15% NEFE acid and 5 ball sealers. Acidized perms 7551-7555' w/1000 gals 15% NEFE acid with 4 ball sealers.

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

SIGNATURE

Juanita Goodlett

TITLE

Production Supervisor

DATE 3-2-89

TYPE OR PRINT NAME

Juanita Goodlett

TELEPHONE NO. 505/748-1471

(This space for State Use)

Original Signed By
Mike Williams

TITLE

DATE

MAR - 3 1989

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

Post ID 2
7-14-89
PAA Hto-mar