## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

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Λ	Form C-103
An	Revised 1-1-8
1 11 1	

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

OIL CONSERVATION DIVISION P.O. Box 2088

ELL API NO. V	
30-015-30166	
5. Indicate Type of Lease	
STATEK	FEE
5. State Oil & Gas Lease No.	

DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210		30-013-30100	
		5. Indicate Type of Lease STATE K FEE	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. V-4129
( DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO	S AND REPORTS ON WE SALS TO DRILL OR TO DEEPEN HR. USE "APPLICATION FOR PE I) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well:	<u> </u>	<del>4</del>	
OIL GAS WELL X  2. Name of Operator	OTHER	*	Crow ASM State Com  8. Well No.
YATES PETROLEUM CORPORAT	ION	POP Ston	1
3. Address of Operator	4 - MM 00210	49 F.S.	9. Pool name or Wildcat
105 South 4th St., Artes	1a, Nr. 00210	0/2	POW Morrow
Unit Letter N: 660	Feet From The South	Line and 23	10 Feet From The West Line
2.0	1.0	0013	
Section 32	Township 16S R	ange 28E	NMPM Eddy County
	3621	•	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
n. Check Ap	propriate Box to Indicate	Nature of Notice, R	leport, or Other Data
NOTICE OF INTE		·	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	BUUG AND ADANGON	BENEDIAL WORK	
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CI	EMENT JOB
OTHER:		OTHER: Set o	conductor
	'hole to 26" with r r pipe. Cemented to	at hole machine	e (0-20'). Drilled to 40'.  Notified Mike Stubblefield
I hereby certify that the information above is true and SIGNATURE WALLY TYPE OR PRINT NAME RUSTY Klein	complete to the best of my knowledge and	obild.  Operations T	echnician DATE May 28, 1998  TELEPHONE NO. 505/748-14
	D SY TIM W. GUM		11.90
DISTRICT II SUPI	irviður m	1.B	DATE $\psi - f - f - f$

APPROVED BY-CONDITIONS OF APPROVAL, IF ANY: