

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	✓

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

AMMENDED REPORT

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Yates Petroleum Corporation ✓	8. Farm or Lease Name Yates "AS" Fee
3. Address of Operator 309 Carper Building - Artesia, New Mexico 88210	9. Well No. 2
4. Location of Well UNIT LETTER L 2310 FEET FROM THE South LINE AND 990 FEET FROM West 25 TOWNSHIP 18S RANGE 25E NMPM.	10. Field and Pool for Wildcat Penasco Draw S.A. Yes
15. Elevation (Show whether DF, RT, GR, etc.) 3465 GL	12. County Eddy

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOBS	<input type="checkbox"/>	OTHER	<input 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.

We plan to drill this well deeper than the originally proposed 2800' to a depth of approximately 6000' to test the Abo. The casing program will be determined when the well reaches TD, and will be cased and cemented according to NMOCC rules.

RECEIVED
MAR 14 1967
O. C. C.
ARTESIA, OFFICE

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

SIGNED <u>ML Armstrong</u>	TITLE <u>Agent</u>	DATE <u>3-13-67</u>
APPROVED BY <u>W. A. Gressett</u>	TITLE <u>OIL AND GAS INSPECTOR</u>	DATE <u>MAR 14 1967</u>
CONDITIONS OF APPROVAL, IF ANY:		