

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION

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

FEB 22 '90

WELL API NO. 30-015-24403
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Whirlwind WL
8. Well No. 1
9. Pool name or Wildcat Undes. Strawn Gas
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3533' GR

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" ARTESIA, OFFICE (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471	
3. Address of Operator 105 South 4th St., Artesia, New Mexico 88210	
4. Well Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 15 Township 18S Range 25E NMPM Eddy County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3533' GR	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Plugback, perforate, treat <input checked="" type="checkbox"/>

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.

10-12-89. Set CIBP at 8450' and cap w/35' cement. Perforated Strawn 8229-8408' w/15 .35" holes as follows: 8229, 30, 31, 32, 37, 38, 53, 62, 64, 80, 8304, 05, 06, 07, 08. Acidized perforations w/2000 gals 7 1/2% acid and 1000SCF/bbl N2.
10-20-89. On a 24-hour flow test well flowed 85 psi on 1/8" choke = 34 mcf.

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 2-21-90

TYPE OR PRINT NAME Juanita Goodlett TELEPHONE NO. 505/748-1471

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

APPROVED BY SUPERVISOR, DISTRICT II TITLE DATE FEB 28 1990

CONDITIONS OF APPROVAL, IF ANY: