Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Min als and Natural Resources Department

Form C-103 Revised 1-1-89 ,

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2080 ED			WELL API NO.
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 APR 1 2 1993		30-015-27292 5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410		L. Die	STATE X FEE 6. State Oil & Gas Lease No. B-7070
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.)			7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL X WELL	OTHER		Walters Lake AML State
2. Name of Operator YATES PETROLEUM CORPOR	ATION		8. Well No.
3. Address of Operator 105 South 4th St., Art	esia, NM 88210		9. Pool name or Wildcat Walter Lake Bone Spring Pool
4. Well Location Unit Letter J : 165	O Feet From The South	Line and _2310	Feet From The East Line
Section 2	Township 18S Rai	nge 30E	NMPM Eddy County
	10. Elevation (Show whether I	OF, RKB, RT, GR, etc.)	
11. Check A	Appropriate Box to Indicate NENTION TO:		eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB .
OTHER:		OTHER: Intermed	liate Casing X
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (Clearly state all pertinent details, an	d give pertinent dates, inclu	ding estimated date of starting any proposed
set 3861'. Cemented w Tailed in w/250 sx "C" to 1250 psi, float hel	/1600 sx PSL "C" with 1 with 2% CaCl2 (yield 1 d OK. Circulated 150 s	/4# Celloseal + .32, wt 14.8). acks cement. W	pat shoe set at 3904', float collar 5 salt/sx (yield 1.92, wt 12.7). PD 9:30 AM 3-21-93. Bumped plug WOC. Drilled out 12:30 AM 3-22-93. Bluced hole to 7-7/8" and resumed
			•
I hereby carrify that the information above is tru	e and complete to the best of my knowledge and		
SIGNATURE LI anna	San det m	Production S	upervisor DATE 4-9-93
TYPE OR PRINT NAME Juanit	a Goodlett		<u>те</u> шерноме но. 505/748-147.
MIKE	NALISIGNED BY		APR 1 4 1993
APPROVED BYSUPER	NISOR DISTRICT II		P. 4777