

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION RECEIVED  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

OCT 20 '88

O. C. D.

ARTESIA OFFICE

Form C-101  
Revised 10-1-79

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-1051
7. Unit Agreement Name
8. Farm or Lease Name Gulf State
9. Well No. 1
10. Field and Pool, or Wildcat Artesia-Q-G-SA
12. County Eddy

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Temporarily Abandon
2. Name of Operator John A. Yates, Jr., Operator
3. Address of Operator 207 South 4th St., Artesia, NM 88210
4. Location of Well UNIT LETTER B 330 FEET FROM THE North LINE AND 2310 FEET FROM THE East LINE, SECTION 8 TOWNSHIP 19S RANGE 28E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Request permission to TA well <input checked="" 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.

Production is low from this well. It is not economically feasible to perform a workover at this time. We respectfully request permission to temporarily abandon the well.

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

Signed Mike Williams TITLE Production Supervisor DATE 10-18-88

Original Signed By  
Mike Williams

APPROVED BY \_\_\_\_\_ DATE OCT 21 1988

CONDITIONS OF APPROVAL, IF ANY: