## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy .inerals 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 2088

WELL API NO. 30-015-20128

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 8750 PEOENED

DISTRICT III

JUN 1 7 1991

5.	5. Indicate Type of Lease				
		STATE	FEE X		
6.	State Oil & Gas Le	ase No.			

1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.			
SUNDRY NOTICES AND REPORTS ON WEL ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A 7 James Name on Visit Agreement Name			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PEF (FORM C-101) FOR SUCH PROPOSALS.)	RMIT*			
1. Type of Well: ORL GAS WELL WELL X OTHER	Carl TP Com			
2 Name of Operator YATES PETROLEUM CORPORATION	8. Well No. 2			
3. Address of Operator	9. Pool name or Wildcat			
105 South 4th St., Artesia, NM 88210	South Dagger Draw U/Penn			
Unit Letter K : 1650 Feet From The South				
Section 22 Township 20S Ra	nge 24E NMPM Eddy County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3695 ' Gr				
11. Check Appropriate Box to Indicate N	Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. DLUG AND ABANDONMENT			
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB			
OTHER:	OTHER: Remedial work - treat well X			
10 D. T. Brand of Completed Completed Clarks state all autient death a	l.			

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.

6-31-91. Acidized existing perforations 7549-7600' (via tubing and casing) with 15000 gals 20% NEFE acid, scale inhibitor and 1000# block in 2 - 7500 gals stages.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.									
SIGNATURE	ita Dodlets	_ 1111.8	Production Supervisor	DATE 6-1	4-91				
	1				EDE /7/0 1/71				
TYPE OR PRINT NAME	Juaniťa Goodlett			TELEPHONE NO	<u>505/748-1</u> 471				
(This space for State Use)	ORIGINAL SIGNED BY			4444	4 0 4001				
	MIKE WILLIAMS			JUN	1 8 1991				
APPROVED BY	SUPERVISOR, DISTRICT I	- TITLE		DATE					

CONDITIONS OF APPROVAL, IF ANY: