

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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 <input type="checkbox"/>		RECEIVED BY APR 03 1984 O. C. D. ARTESIA, OFFICE	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator Yates Petroleum Corporation			5. State Oil & Gas Lease No. K-6596
3. Address of Operator 207 South 4th St., Artesia, NM 88210			7. Unit Agreement Name
4. Location of Well UNIT LETTER 0 660 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 2 TOWNSHIP 19S RANGE 28E NMPM.			8. Farm or Lease Name State HA 9. Well No. 1 10. Field and Pool, or Wildcat Artesia-QN-Grbg.-SA
11. Elevation (Show whether DF, RT, GR, etc.)		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"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Perforate, Treat <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 JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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.

Well is presently completed in Grayburg perms 2118-87 and is depleted.
Propose to perforate Penrose sand at 1909-21 and stimulate for production.

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

SIGNED <u>Francis Goodlett</u>	TITLE <u>Production Supervisor</u>	DATE <u>4-2-84</u>
Original Signed By Leslie A. Clements		
APPROVED BY _____	TITLE <u>Supervisor District II</u>	DATE <u>APR 04 1984</u>
CONDITIONS OF APPROVAL, IF ANY:		