_	State of New Me	ico	Form C-103
Submit 3 Copies to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			30-015-22746 5. Indicate Type of Lesse
			STATE STATE FEE
			L-6287
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: OL GAS WELL X WELL			Irish Hills JE State Com
2. Name of Operator	the second se		8. Well No.
YATES PETROLEUM CORPORATION			9. Pool name or Wildcat
3. Address of Operator U.C. N.C. 1943 105 South 4th St., Artesia, NM 88210			Undesignated Canyon
4. Well Location			
Unit Letter $\underline{G}$ : $\underline{19}$	80 Feet From The North	and a contrary of a	80 Feet From The East Line
Section 12	Township 195 Ra		NMPM Eddy County
	10. Elevation (Show whether I	OF, RKB, RT, GR, etc.)	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
	TENTION TO:	SUE	SEQUENT REPORT OF:
		REMEDIAL WORK	
	CHANGE PLANS	COMMENCE DRILLIN	
PULL OR ALTER CASING			
OTHER:		OTHER: Repair	8-5/8" casing X
12. Describe Proposed or Completed Op work) SEE RULE 1103.	erations (Clearly state all pertinent details, an	d give pertinent dates, incl	uding estimated date of starting any proposed
10-10-96 - Dig out 6	cellar with backhoe. 'Cl rds of ready-mix cement.	eaned out arou Shut down fo	nd 8-5/8" casing. Filled r 36 hours.
10-11-96 - Shut down 10-12-14-96 - Rigger for 30 minutes - no	n. WOC. d up kill truck to 4-1/2 leak off. Rigged down	" casing. Pre	ssured up csing to 300 psi led off casing. Released
well to production	department.		· · · · · · · · · · · · · · · · · · ·
$\cap$			
I hereby certify that the information above in	true and complete to the best of my knowledge and	belief.	Technician Oct 10 1006
SIGNATURE Kusty T	flinT	Operations	-
TYPE OF PRINT NAME Rusty Kle	in		TELEPHONE NO. 505/748-14
(This space for Sinte Use)	NCNER BY THE WE GUINE		DPT or Home
(This space for State Use) ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR TITLE			OCT 2 5 1996
APPROVED BY	Π	All	
CONDITIONS OF APPROVAL, IF ANY:			