## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C	-103
Revised	1-1-89

DISTRICTI

OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 88240  P.O. Box 2088  DISTRICT II  P.O. Drawer DD, Artesia, NM 88210  DISTRICT III  1000 Rio Brazos Rd., Azzec, NM 87410  P.O. Box 2088  Santa Fe, New Mexico 87504-2088 ED  OCT - 8 1993		STATE FEE X			
				6. State Oil & Gas Lease No.	
			OTICES AND REPORTS ON WEL		
DIFFERENT RE	PROPOSALS TO DRILL OR TO DEEPEN SERVOIR. USE "APPLICATION FOR PER M C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name		
1. Type of Well:					
OF. GAS WELL	X OTHER		Rio Penasco KD Com		
2. Name of Operator			8. Well No.		
YATES PETROLEUM COR	PORATION	<u> </u>	1		
3. Address of Operator			9. Pool name or Wildcat		
	reet - Artesia, NM 88210		Boyd Morrow		
4. Well Location	660 Courth	. 1000	Most		
Unit Letter N :	660 Feet From The South	Line and 1900	Feet From The West Line		
<b>a</b> .: 3	m	255	NMPM Eddy County		
Section 2	Township 19S Ra		NMPM Eddy County		
	3438' GR	•			
11. Che	ck Appropriate Box to Indicate	Nature of Notice, R	Report, or Other Data		
	<del>-</del>		SEQUENT REPORT OF:		
1101102 01	NOTICE OF INTENTION TO:				
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 C	CASING TEST AND CEMENT JOB		
OTHER:		OTHER: Add perforations X			
12. Describe Proposed or Completed	Operations (Clearly state all pertinent details, a	nd give pertinent dates, incl	uding estimated date of starting any proposed		
work) SEE RULE 1103.					
w/1-11/16" pivot gun	CL. Log through packer wit Derforated 8906-8916' w	/40 holes (4 SP)	F). TOOH. TIH w/1-11/16"		
Enerjet strip gun an test well. Returned	d perforated 8964–8974' w/ l to production.	40 holes (4 SPF	). TOOH. Swab and flow		
		. •			
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		•			

I hereby cernfy that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE TYPE OR PRINT NAME RUSTY Klein  THE Production Clerk DATE 10-7-93  505-748-1471 TELEPHONE NO.			
SIGNATURE TIME TOUGHETON OFFICE DATE  505-748-1471	I hereby certify that the information above is true and complete to the best of my knowledge	ge and belief.	
505-748-1471	Rustin Klein	THE Production Clerk	DATE 10-7-93
TYPE OR PRINT NAME RUSTY Klein TELEPHONE NO.	<i>// / / .</i>		
	TYPEOR PRINT NAME Rusty Klein		TELEPHONE NO.

(This space for State Use)

APPROVED BY -

ORIGINALISIGNED BY MIKE WILLIAMS

SUPERVISOR, DISTRICT II

OCT 1 9 1993