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State of New Mexico			Form C-103	
Submit 3 Copies to Appropriate District Office	Energy, Minerals and Natural Res	sources Department	Revised 1-1-89 3	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO P.O. Box 208	<u> </u>	WELL API NO. 30-015-23585	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088 AUG - 4 1992		5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		Q. C. D.	6. State Oil & Gas Lease No.	
(DO NOT USE THIS FORM FOR PRODUCTION OF THE PRO	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PER 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL WELL	OTHER SW	TD.	Routh NU Deep Com	
2. Name of Operator YATES PETROLEUM CORPOR			8. Well No.	
3. Address of Operator 105 South 4th St., Art			9. Pool name or Wildcat Und. Devonian	
4. Well Location	0 Feet From The North	Line and198		
Section 14	10. Elevation (Show whether a 3649 GR	DF, RKB, RT, GR, etc.)	NMPM Eddy County	
11. Check NOTICE OF IN	Appropriate Box to Indicate 1 TENTION TO:	Nature of Notice, Re	SEQUENT REPORT OF:	
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 COTHER: Test case				
OTHER:		<u> </u>		
work) SEE RULE 1103.	rations (Clearly state all pertinent details, ar			
7-17-92. RU. Dug po 30 minutes with no le	it. Ran casing test. I eak off. Witnessed by M	Loaded casing. Mike Stubblefiel	Pressure tested to 500 psi for d with NMOCD. Approved test.	

I hereby certify that the information	nation above is true and complete to the best of my knowle	mre Production Supervisor	DATE
TYPE OR PRINT NAME	Juanita Goodlett		ТЕГЕРНОНЕ NO. 505/748-147
(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS		AUG 1 0 1992
APPROVED BY	SUPERVISOR, DISTRICT IF	πn.ε	DATE