Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department		Form C-103 Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO P.O. Box 208 Santa Fe, New Mexico		WELL API NO. 30-015-26299	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease  STATE FEE XX	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		MAY 11 '90	6. State Oil & Gas Lease No.	
( DO NOT USE THIS FORM FOR PRODIFFERENT RESER	CES AND REPORTS ON WEL DPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PER -101) FOR SUCH PROPOSALS.)	OR PLUG BASKEO A	7. Lease Name or Unit Agreement Name	
1. Type of Well: Oil. GAS WELL X WELL .	OTHER		Cooper AHH	
2. Name of Operator YATES PETROLEUM CORPOR	ATION		8. Well No.	
3. Address of Operator 105 South 4th St., Artesia, NM 88210			9. Pool name or Wildcat North Dagger Draw Upper Penn	
4. Well Location Unit Letter F: 1650	Feet From TheNorth	Line and	Feet From The West Line	
Section 1			NMPM Eddy County	
	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3610' GR			
11. Check A	Appropriate Box to Indicate NENTION TO:	•	eport, or Other Data SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. X PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB	
OTHER:		OTHER:		

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.

Spudded 26" hole 3:00 PM 5-6-90. Set 40' of 20" conductor pipe. Redi-mix to surface with 4 yards. Notified NMOCD, Artesia, NM, of spud. Resumed drilling 14-3/4" hole with rotary 8:00 AM 5-7-90.

I hereby certify that the inform	antion above is true and complete to the best of my know	ledge and belief.  TIME Production Supervisor	DATE 5-10-90
TYPE OR PRINT NAME	Juanita Goodlett		<b>ТЕЦЕРНОМЕ NO.</b> 505/748-1471
(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS		MAY 2 1 1990
APPROVED BY	SUPERVISOR, DISTRICT IF	mle	DATE