Submit 3 Copies

State of New Mexico als and Natural Resources Department

Form	C-103	
Revis	ed 1-1-	٤

JAN 1 4 1992

- DATE -

d	\$TO
Cl	Vp

to Appropriate District Office	Ellergy, icrais and Natural N	esources Department	Keylsed 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION		WELL API NO.	
DISTRICT II	Santa Fe, New Mexico		30-015-26454	
P.O. Drawer DD, Artesia, NM 88210	·		5. Indicate Type of Lease STATE FEE XX	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		DEC 3 1 1991	6. State Oil & Gas Lease No.	
(DO NOT USE THIS FORM FOR PRODIFFERENT RESER	RVOIR. USE "APPLICATION FOR PE	N OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
1. Type of Well:	-101) FOR SUCH PROPOSALS.)		 	
OIL XX WELL	OTHER		Foster AN	
2. Name of Operator YATES PETROLEUM CORPOR	ATTON		8. Well No.	
3. Address of Operator	ATION		2 9. Pool name or Wildcat	
105 South 4th St., Art	esia, NM 88210	÷	North Dagger Draw U/Penn	
4. Well Location				
Unit Letter B: 660	Feet From The North	Line and198	BO Feet From The East Line	
Section 1	Township 20S	tange 24E	NMPM Eddy County	
	10. Elevation (Show whether			
	Agreements Pow to Indicate		Vanort or Other Data	
NOTICE OF INT	Appropriate Box to Indicate		Report, or Other Data SSEQUENT REPORT OF:	
	IENTION TO:	508	SEQUENT REFUNT UP:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
OTHER:		OTHER: Perfor	ate, Treat X	
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	ations (Clearly state all pertinent details,	and give pertinent dates, incli	uding estimated date of starting any proposed	
as follows: 7680, 82, 58, 60, 79, 82, 84, 86	84, 86, 88, 90, 7722, ,88, and 7790'. Acid 22-60' w/1500 gals 20%	24, 26, 30, 32 lized perforation HCL; perfs 768	790' w/5250" holes (2 SPF), 34, 36, 40, 42, 52, 54, 56, ns as follows: 7779-90' w/3000 0-90' w/500 gals 20% HCL; and ball sealers.	
I hereby certify that the information above is try	ue and complete to the best of my knowledge a	nd belief.		
	·)	me Production S	Supervisor DATE 12-30-91	
TYPE OR PRINT NAME Juanit	a Goodlett		тецерноме по. 505/748-1	
	NAL SIGNED BY			
/			日外 社 ・ 	

MIKE WILLIAMS

CONDITIONS OF APPROVAL, IF ANY:

SUPERVISOR, DISTRICT II