Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Min s and Natural Resources Department

Form C-103 Revised 1-1-89

OH CONCEDIVATION DIVICION

P.O. Box 1980, Hebbs, NM 88240	OIL CONSERVAT		WELL API NO. 17	
DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504,2088		30-015-26968	
P.O. Drawer DD, Artesia, NM 88210	Dania 1 c, New Mexic	W WASORECEIVED	5. Indicate Type of Lease STATE	FEE XX
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		JUN - 9 1992		
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESER (FORM C	ICES AND REPORTS ON WOPOSALS TO DRILL OR TO DEEF RVOIR. USE "APPLICATION FOR -101) FOR SUCH PROPOSALS.)	PEN OR PLUG BACK TO A	7. Lease Name or Unit Agreem	ent Name
1. Type of Well: OIL GAS WELL X WELL	OTHER Wor	kover	Thomas AJJ Com	
2. Name of Operator	ATTON		8. Well No.	
YATES PETROLEUM CORPOR 3. Address of Operator	ATTON J		9. Pool name or Wildcat	
105 South 4th St., Art	esia, NM 88210		North Dagger Draw	U/Penn
4. Well Location	0 27 .1	100		
Unit Leter G: 198	O Feet From The North	Line and198	Feet From The East	Line
Section 8	///////	ther DF, RKB, RT, GR, etc.)	NMPM Eddy	County
//////////////////////////////////////	3553' GR		anant an Other Date	
NOTICE OF IN	Appropriate Box to Indica	·	eport, or Other Data SEQUENT REPORT	OE.
NOTICE OF IN	TENTION TO.	_	SEQUENT REPORT	OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. DPLUG AND	ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CI	EMENT JOB	
OTHER:		OTHER: Added pe	rforations - exist	ing zone X
Describe Proposed or Completed Oper work) SEE RULE 1103.	ations (Clearly state all pertinent detail	ils, and give pertinent dates, inclu	ding estimated date of starting an	proposed
5-29-92. Perforate 7856, 58, 60, 62, 6 2000g. 20% NEFE aci	s 7776-82', 7794-98', d 7842-7872' w/24 .504, 66, 68, 70, and 78d. Treated perfs 7776 well to production.	O" holes as follow 372' (2 SPF-18 hol	es). Treated perf:	
				· · · · · · · · · · · · · · · · · · ·
				. .
I hereby certify that the information above is a	pue and complete to the best of my knowled			
SIONATURE CANALA) O odlitt	_ mme Production S	upervisor DATE	6-8-92
TYPE ON PRINT N.ME Juani	ta Goodlett		TELEPH	ONE NO. 505/748-14
	GINAL SIGNED BY		;	UN 1 6 1992
APPROVED BY SUI	ŒWILLIAMS PERVISOR, DISTRICT II	_ TITLE	J - DATE	OI4 # 0 1335