

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED BY
OCT 7 1983
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
K-6854

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Yates Petroleum Corporation	8. Farm or Lease Name Stonewall WM State
Address of Operator 207 South 4th St., Artesia, NM 88210	9. Well No. 2
Location of Well UNIT LETTER P, 480 FEET FROM THE South LINE AND 990 FEET FROM East LINE, SECTION 30 TOWNSHIP 20S RANGE 28E NMPM.	10. Field and Pool, or Wildcat Undes. Delaware
15. Elevation (Show whether DF, RT, GR, etc.) 3243' GR	12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☒ OTHER ☐

17. 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 17-1/2" hole 6:00 PM 9-30-83. Ran 14 joints 13-3/8" 54.5# J-55 casing set 546'. 1-Texas Pattern notched guide shoe set 546'. Insert float set 510'. Cemented w/550 sacks Class "C" 2% CaCl₂. Compressive strength of cement - 1250 psi 12 hours. PD 1:00 PM 10-1-83. Bumped plug to 1000 psi, released pressure and float held okay. Cement circulated 25 sacks. WOC. Drilled out 1:00 AM 10-2-83. WOC 12 hours. Cut off and welded on flow nipple. Reduced hole to 12-1/4". Drilled plug and resumed drilling.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Leslie A. Clements TITLE Production Supervisor DATE 10-4-83
Original Signed By Leslie A. Clements
APPROVED BY Supervisor District II DATE OCT 7 1983
CONDITIONS OF APPROVAL, IF ANY: