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 CONSERVATION DIVISION
P.O. Box 2088
P.O. Box 2088
P.O. Box 2088

30-015-26906

WELL API NO.

DISTRICT II	Santa Fe, New Mexico	87504-2088	
O. Drawer DD, Artesia, NM 88210	Dania 10, 110W Woxloo	APR 2 1 1992	5. Indicate Type of Lease STATE FEE FEE
OSTRICT III 000 Rio Brazos Rd., Aztec, NM 87410		Q. C. D.	6. State Oil & Gas Lease No. L 5036
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.)			7. Lease Name or Unit Agreement Name
Type of Well: OIL GAS WELL WELL X	OTHER		Glider AKG State
Name of Operator YATES PETROLEUM CORPORATI	on		8. Well No.
3. Address of Operator 105 South 4th St., Artesi	2 NM 88210		9. Pool name or Wildcat
4. Well Location	a, Nr 00210		Burton Flat Morrow
	Feet From The North	Line and 1980	Feet From TheWest Line
Section 17			NMPM Eddy County
	10. Elevation (Show whether 3204' G		
11. Check App	propriate Box to Indicate	Nature of Notice, R	eport, or Other Data
NOTICE OF INTENTION TO: SUB			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
JILL OR ALTER CASING CASING TEST AND C		EMENT JOB	
OTHER:		OTHER: Interm	nediate Casing X
2542', float collar se Stage I - 165 sx PSL " 1.63, wt 13.3). Tail ECP. Opened DV tool.	. Ran 58 joints 9-5 t 2498'. DV tool se C" + 1% CaCl2 + .6% in w/200 sx "C" + .4 Stage II - 350 sx I in w/200 sx "C" + 2%	5/8" 36# J-55 ca et 1178'. Cemen CF-14 + 5#/sx 6 4% CF-14 + 2% Ca PSL "C" + 3% Gil % CaCl2 (yield 1	using set 2542'. Float shoe set ated in two stages as follows: Gilsonite $+ \frac{1}{4}/\frac{\pi}{5}$ Celloseal (yield 1.32, wt 14.8). Inflaconite $+ \frac{1}{4}/\frac{\pi}{5}$ Celloseal (yield 1.32, wt 14.8). PD 3:10 PM 4-3-9

I hereby certify that the inform	nation above is true and complete to the best of my know	ledge and belief.		
SIGNATURE Landa Darlies		mme Production Supervisor	DATE 4-20-92	
TYPE OR PRINT NAME	Juanita Goodlett		тецерноме NO. 505/748-1471	
(This space for State Use)	ORIGINAL SIGNED BY		APR 2 3 1992	
APPROVED BY	SUPERVISOR, DISTRICT II	mr.e	DATE	

CONDITIONS OF APPROVAL, IF ANY: