Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
OCT 2 '90

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells)	30-015-20423
5. Indicate Type of Lease	STATE [X] FEE [ ]
6. State Oil & Gas Lease No.	V-120

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
DRILL [ ] RE-ENTER [ ] DEEPEN [ ] PLUG BACK [X]

b. Type of Well:
OIL WELL [ ] GAS WELL [X] OTHER RECOMPLETION SINGLE ZONE [ ] MULTIPLE ZONE [ ]

7. Lease Name or Unit Agreement Name: Medano VA State

2. Name of Operator: YATES PETROLEUM CORPORATION

8. Well No.: 1

3. Address of Operator: 105 South 4th St., Artesia, NM 88210

9. Pool name or Wildcat: Undes. Delaware

4. Well Location
Unit Letter K : 1947 Feet From The South Line and 1986 Feet From The West Line

Section 16 Township 23S Range 31E NMPM Eddy County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
	Delaware	Pulling Unit

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3358' GR	Blanket	-	When approved

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
26"	20#	94#	600'	1000 sx (in place)	
17½"	13-3/8"	61#	4400'	3500 sx (in place)	
12¼"	9-5/8"	43.5#	12500'	1200 sx (in place)	

Propose to abandon Bone Springs perforations 8065-8639' and 8256-8539' by setting RBP at 5900'. If RBP and casing test okay, spot 5 sacks 20/40 mesh sand on top of RBP.

Propose to recomplete well in Delaware formation by perforating 4218-4226' and 4229-4237' 4 SPF at 60 or 90 deg. shot phasing. Will stimulate perforations with 1500 gals 7½% NEFE HCL acid if necessary to obtain production.

180
4/10/91

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Juanita Goodlett TITLE Production Supervisor DATE 10-2-90

TYPE OR PRINT NAME Juanita Goodlett TELEPHONE NO. 505/748-1471

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II TITLE DATE DEC 14 1990

CONDITIONS OF APPROVAL, IF ANY: