

D. M.	
Land Office	
B of M	
Operator	

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088
RECEIVED
MAY 23 '90

O. C. D.

ARTESIA, OFFICE

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.)

1. Type of Well:

OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator

Yates Energy Corporation

3. Address of Operator

P. O. Box 2323, Roswell, NM 88202-2323

4. Well Location

Unit Letter **F** : **2310** Feet From The **North** Line and **1980** Feet From The **West** Line

Section **20** Township **24-S** Range **24-E** NMPM **EDDY** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4277.6 GR

11.

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: ☐

12. 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.

Commenced drilling a 17 1/2" hole at 7:00 AM 5/18/90. Ran 8 jts. 13 3/8" 54.50#/ft., J-55, ST&C casing set @ 325'. Cemented w/100 sacks Halliburton Lite w/1/4# flocele/sk., 10# gilsonite/sk., and 2% CACL2; followed w/350 sks. Class "C" w/2% CACL2. Plug down @ 10:10 PM 5/20/90. Cement did not circulate to surface, top of cement at 35' from surface. 16 hours wait on cement, test to 700 psig for 45 minutes, OK. Resumed drilling a 12 1/4" hole 5/21/90.

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

SIGNATURE Sharon R. Hamilton TITLE Landman DATE 5/22/90

TYPE OR PRINT NAME Sharon R. Hamilton TELEPHONE NO. 623-4935

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE MAY 29 1990

CONDITIONS OF APPROVAL, IF ANY: