

Submit 3 Copies
to Appropriate
District Office

BLM		
Land Office		
B of M		
Operator		

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

clsf
dp +

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

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

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

DISTRICT III
10041 Rio Brazos Rd., Aztec, NM 87410

"CONFIDENTIAL"

WELL API NO. 30-015-26334
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Sidewinder
8. Well No. 1
9. Pool name or Wildcat Und. Crooked Creed (Morrow)

Section 20	Township 24-S	Range 24-E	NMPM	EDDY	County
10. Elevation (Show whether DF, RAB, RT, GR, etc.) 4277.6 GR					

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> 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, RAB, RT, GR, etc.) 4277.6 GR					

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: DST Summary <input checked="" type="checkbox"/>

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.

6-28-90 TD 10,320', pulling out of hole with test tools on convential test No. 4 from 9,980' to 10,320'.

See attachment for DST Summary.

RECEIVED

JUL 23 '90

O. C. D.
ARTESIA, OFFICE

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 7/20/90
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 AUG 13 1990

CONDITIONS OF APPROVAL, IF ANY: