Submit 3 Copies It and Office State of New Mexico Bit M Cyprision Energy, herals and Natural Resources Department	Form C-103 Revised 1-1-89
OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 Santa Fe, New Mexico 87504-2088	WELL AFI NO. 30-015-26334
D'STEICTIII I(U.G. Ro. Brazos Rd., Azec, NM 87410 "CONFIDENTIAL"	5. Indicate Type of Lease STATE FEE X 6. State Oil & Gas Lease No.
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
I. Type of Well: OIL OAS WELL OTHER 2. Name of Operator	Sidewinder
Yates Energy Corporation	8. Well No. 1
P. O. Box 2323, Roswell, NM 88202-2323 Well Location	9. Pool name or Wildcat Und. Crooked Creed (Morrow)
Unit Letter F : 2310 Feet From The North Line and 1980 Feet From The West Line	
Section 20 Township 24-S Range 24-E	FDDY
10 Elevation (Show whether DF, RKB, RT, GR, etc.) 4277.6 GR	KMPM County
Check Appropriate Box to Indicate Nature of Notice, R	eport, or Other Data
E DECODA DE LAS DIAL MADO.	SEQUENT REPORT OF:
EMPORARILY ARANDON	ALTERING CASING
ULL OR ALTER CASING	
THER:	
12 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dotes, including estimated date of starting arts proposed work). SEE RULE 1103.	
Ran 82 jts. 5 1/2", 17#/ft., J-55 LT&C casing set @ 3500' KB. CMT. w/1000 gals. mud flush, followed by 10 bbls. wtr., followed by 1000 gals. super mud flush II, followed by 10 bbls. wtr. Pmpd. 500 sx. 50/50 poz Class "C" with 6# Salt/sx., 1/4# flocele/sx., and .04% Halad 322. Mixed at 13.9#/gal., displaced w/8 bbls. wtr. Plug down @ 6:15 PM 6/29/90. Set slips and cut-off. Rig released at 11:00 PM 6/29/90. Rig has moved off location. Pits are being fenced.	
	JUL 23 '90
	Ö. C. D. ARTESIA, OFFICE
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SKONATURE CHARGE CAMBOLINE Landman	DATE July 20, 1990
TYPE OF PRINT NAME Sharon R. Hamilton	אורענד וו 1723–4935
(Thus space for State Use) ORIGINAL SIGNED BY	<u> </u>

AUB 1 3 1990

CONDITIONS OF APPROVAL, IF ANY:

ATTROVED BY-

MIKE WILLIAMS

SUPERVISOR, DISTRICT IT