## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

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Form C-103 Revised 1-1-89	I

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

## OIL CONSERVATION DIVISION P.O. Box 2088

WELL API NO.

- DATE -

ACCOUNT OF THE PROPERTY OF THE		30-015-26497		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of	STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		NOV 14'90	6. State Oil & Gas V-3346	
( DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR	AND REPORTS ON WELLALS TO DRILL OR TO DEEPEN ( . USE "APPLICATION FOR PER FOR SUCH PROPOSALS.)	LS OR PLUG BACK TO A MIT ARTES!A SFRCE	7. Lease Name or	Unit Agreement Name
1. Type of Weil: OIL GAS WELL X WELL	OTHER		Loving AIB	State
2. Name of Operator YATES PETROLEUM CORPORAT	ION (505) 744	8-1471	8. Well No.	
3. Address of Operator 105 South 4th St., Artes 4. Well Location	ia, New Mexico 882	10	9. Pool name or W South Lovi	fidcat ng Delaware
	eet From The South	Line and2040	Feet From	The East Line
Section 16	ownship 23S Ran 10. Elevation (Show whether L		NMPM Ed	dy County
	3016' GR	)F, KKB, KI, GK, 2(C.)		
4.4	opriate Box to Indicate N	•	•	
NOTICE OF INTEN	FION TO:	SUB	SEQUENT R	EPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. X	PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB X		
OTHER:	🗆	OTHER:	· · · · · · · · · · · · · · · · · · ·	
12 Describe Proposed or Completed Operations (6 work) SEE RULE 1103.  Spudded 18" hole 10:45 AM 1 12-1/4" hole 11:30 PM 11-5-shoe set 524', insert float wt 14.8). PD 10:00 PM 11-6 35 sacks. WOC. NU and tes 16 hrs and 45 minutes. Red	1-4-90. Notified N 90. Ran 12 joints set 583'. Cemented -90. Bumped plug to ted to 1000 psi for	MOCD, Artesia, 9-5/8" 36# J-55 d w/275 sx Clas o 500 psi, floa 30 mins. Dril	of spud. Ro ST&C caisn s C w/2% Cao t held okay led out 2:4	esumed drilling g set 524'. Guide C12 (yield 1.32, Cement circulated 5 PM 11-7-90. WOC
I hereby certify that the information aboye is true and co	mplete to the best of my knowledge and b	edicf.		
SIONATURES ainto Landle	<u>γ</u> πη	Production Su	pervisor	DATE 11-12-90
TYPEORPRINTNAME Juanita Goodle	it			TELEPHONE NO. 505/748-14
(Thus space for State Use) ORNGIN:AL MIKE WILL	SIGNED BY			NOV 1 6 1990

\_ TITLE \_

SUPERVISOR, DISTRICT IT