Subject 3 Copies to Appropriate District Office

State of New Mexico Enc Minerals and Natural Resources Department

Form C-103
Revised 1-1-8

DISTRICT 1 P.O. Box 1980, Hobba, NM 88240

OIL CONSERVATION P.O. Box 2088

WELL API NO. 30-015-26633

5.	Indicate Type of Lea				
		STATE	•	FEE	
					=

DISTRICT II	88 87504,2088 1393	30-015-26633			
P.O. Drawer DD, Ariesia, NM 88210 DISTRICT III	5. Indicate Type of Lease STATE XX FFF				
1000 Roo Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. V-120				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PLUG BACK TO A					
	SE "APPLICATION FOR PE SUCH PROPOSALS.)	OR PLUG BACK TO A RMIT*	7. Lease Name	or Unit Agreement Name	
METT X METT OT O	OTHER		Medano "'	VA" State	
2 Name of Operator Yates Petroleum Corporation			8. Well No.		
3. Address of Operator			4		
105 South Fourth Street, F	rtecia Now Movi	20 99310 749 14	9. Pool name or	Wildcat	
4. Well Location	TCESIA, NEW MEXI		rı Los Meda	anos Delaware	
	South	2201			
Unit Letter : 1980 ' Feet F	rom The	Line and	Feet Fro	West	Line
Section 16 Towns	tin 23S	31E	Eddy		
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	IMPM	-7000000000000000000000000000000000000	County
	3343'	, , , , , , , , , , , , , , , , , , ,		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	
11. Check Appropri	ate Box to Indicate N	Vature of Notice De	nort or Osha	<u> - Y///////////////////////////////////</u>	
NOTICE OF INTENTIO	N TO:				
		-	EQUENT I	REPORT OF:	
	3 AND ABANDON	REMEDIAL WORK		ALTERING CASING	
	NGE PLANS XX	COMMENCE DRILLING	OPNS.	PLUG AND ABANDONN	IENT
ULL OR ALTER CASING		CASING TEST AND CEN	MENT JOB		_
THER:	🗆	OTHER:			
 Describe Proposed or Completed Operations (Clearly work) SEE RULE 1103. 	state all pertinent details, and	d give pertinent dates, includi	ng estimated date of	f starting any proposed	
This well was originally a	pproved at 1980.	FSL and 660' FV	L. Due to	geological	
reasons Yates Petroleum Co and 330' FWL. New C-102 i		to change locat	10n to 198	30' FSL	
and 330 rwh. New C-102 1	s attached.				
		•			
					•

NEWCOCK 4 APS I hereby certify the implete to the best of my knowledge and belief. Permit Agent SIONATURE 3/11/93 Clifton R. May TYPE OR PREYT NAME 748-1471 TELEPHICNE NO. (This space for State Use)

CONDITIONS OF APPROVAL, IF ANY:

POTE IOT' 3. 1.63