			PECEIVED	ľ	
Submit 3 Copies to Appropriate District Office	State of New Me Energy, Minerals and Natural Re	exico esources Department		Form C-103 Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO P.O. Box 208		O. C. D.		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe. New Mexico 87504-2088		30-015-23959 <b>5.</b> Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease N V-2173	ATE X FEE	
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 Agr	reement Name	
1. Type of Well:	GAS WELL OTHER RE-ENTRY			Southland AKL State	
2. Name of Operator YATES PETROLEUM CORP			8. Well No.		
3. Address of Operator 105 South 4th St., Artesia, New Mexico 88210 4. Well Location			9. Pool name or Wildcat Wildcat Delaware		
	O Feet From The North	Line and660	Feet From The	East Line	
Section 1	Township 25S Ran 10. Elevation (Show whether I	DF, RKB, RT, GR, etc.)	NMPM Eddy	County	
	Appropriate Box to Indicate N		•		
NOTICE OF INT PERFORM REMEDIAL WORK	PLUG AND ABANDON	SUB REMEDIAL WORK	SEQUENT REPOR		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING		NG CASING	
PULL OR ALTER CASING		CASING TEST AND CE	<del></del> 1	ADAINDONNE (17 )	
OTHER:		OTHER:			
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (Clearly state all pertinent details, and	d give pertinent dates, inclu	ding estimated date of starting	any proposed	
1-31-92. Notified John Drilled cement 0-150' 2-2-92. Drilled cement 2-3-92. Drilled cement Tag shoe at 2013'. Adrill collars. Ran tu Williams, NMOCD, Artes	nny Robinson, NMOCD, Arg. Started drilling 10 nt 150-300'. Drilled sont 1600-2115'. Tag at 2 Made 3' of hole. POH. ubing open-ended to 222 sia. Pumped 100 sx plugg. WOC 3 hrs. Tagged p	:00 PM 1-31-92. tringers 500-16 2192'. Drilled Ran 3-7/8" bit 7'. Discussed g. POH and wai	00'. formation. Dri to 2227'. POH a plugging progam	lled 2212-2227'. nd laid down	
		· · · · · · · · · · · · · · · · · · ·			
I hereby certify that the information above is true	e and complete to the best of my knowledge and b		pervisor	2-4-92	
TYPEOR PRINT NAME Juanita Goo				PHONE NO. 505/748-1471	

– TITLE –

**TELEPHONE NO.** 505/748-1471

- DATE -

CONDITIONS OF APPROVAL, IF ANY:

(This space for State Use)

APPROVED BY ----