Submit 3 Copies to Appropriate District Office	State of New Mexi Energy inerals and Natural Reso		Form C-103 Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	(1980, Hobbs, NM 88240 P.O. Box 2088		<b>ELL API NO.</b> 30-005-62691	
P.O. Drawer DD, Artesia, NM 88210	Sama re, new mexico or	RECEIVED	. Indicate Type of Lesse STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		FER 21 '00	Nate Oil & Gas Lesse No. V-1363	
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.)		S R PLUG BACK TO A 7	7. Lesse Name or Unit Agreement Name Yates Valley State Com	
1. Type of Well: OL GAS WELL X WELL	OTHER		-	
2. Name of Operator Hanson Operating Com	pany, Inc.	8	. Well No. 1	
1. Address of Operator P. O. Box 1515, Roswell, New Mexico 88202-1515			9. Pool name or Wildcat Wildcat	
4. Well Location Unit Letter <u>G</u> : <u>1650</u> Feet From The <u>North</u> <u>Line and 2310</u> Feet From The <u>East</u> <u>Line</u> Section <u>36</u> Township <u>105</u> Range <u>26E</u> NMPM Chaves County				
10 Elevation (Show whether DF, RKB, RT, GR, etc.) 3716' GR				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
		REMEDIAL WORK		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT				
PULL OR ALTER CASING				
OTHER:	🗆 🗠	DTHER:		

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.

Post ID-2 3-9-90

Verbal approval was given by Mike Williams w/NMOCD to plug & abandon the above-mentioned well in the following manner:

- 1) Set a CIBP @ 1725'. Cap w/35' Class "C" cement plug.
- 2) Set a 25 sx 100' Class "C" cement plug f/1287-1187'.
- 3) Set a 10 sx 50' Class "C" cement plug at surface.

All plugs were placed w/10# mud laden fluid.

Plugging was witnessed by Mike Stubblefield w/NMOCD on 02/15/90.

I hereby certify that the information above is true and complete to the best of my knowled SKINATURE CHIMICA R. Houftelf	dge and belief. Production Analyst	DATE 02/20/90
TYPE OR PRINT NAME		TELEPHONE NO.
(This space for State Use) APPROVED BY Johnny Rolumsin	TITLE GAS JEWER CAS	DATE 6-6-90
CONDITIONS OF AFFROVAL, IF ANY: T OK GW		