

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
E. y. Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

cliff
Op

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JAN 26 '90

O. C. D.

WELL API NO. 30-005-62756
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-2328
7. Lease Name or Unit Agreement Name Bittersweet Unit
8. Well No. 1
9. Pool name or Wildcat Wildcat Ordovician
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3763.0' GR

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator Yates Petroleum Corporation
3. Address of Operator 105 South Fourth Street, Artesia, New Mexico 88210
4. Well Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 28 Township 9 South Range 26 East NMPM Chaves County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

We plan to spud this well with a cable tool and at a later date move in the rotary rig to drill the well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Clifton R. May TITLE Permit Agent DATE 1-26-90
TYPE OR PRINT NAME Clifton R. May TELEPHONE NO. (505) 748-1471

(This space for State Use) ORIGINAL SIGNED BY MIRE WILLIAMS DATE JAN 30 1990
APPROVED BY SUPERVISOR DISTRICT II TITLE DATE
CONDITIONS OF APPROVAL, IF ANY: