State of New Mexico

Form	C-103
Revis	ed 1-1-89

to Appropriate District Office	Energy,	nerals and Natural	Resources Department	Form C-103 Revised 1-1-6	89 d'
DISTRICT I P.O. Box 1980, Hobbs, NM			ION DIVISION	WELL ADLAND	
DISTRICT II	00240	P.O. Box 2	2000CEIVED	WELL API NO. 30-005-62822	
P.O. Drawer DD, Artesia, NM	f 88210 Sa	inta Fe, New Mexic	co 87504-2088	5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aziec, 1	NM \$7410		JAN - 7 1992	STATE F	EE XX
			O. C. D.	6. State Oil & Gas Lease No.	
DIFFER	ORY NOTICES AND IM FOR PROPOSALS T ENT RESERVOIR. USI (FORM C-101) FOR S	O DRILL OR TO DEEP E "APPLICATION FOR I	EN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL WELL	GAS WELL X	OTHER		Rolla TC	
2. Name of Operator YATES PETROLEUM	CORPORATION	7		8. Well No.	
3. Address of Operator				9. Pool name or Wildcat	
105 South 4th S	t., Artesia, N	M 88210		Undes. Wolfcamp	
4. Well Location	1000				
Unit Letter G	:1980 Feet Fr	om The North	Line and2310	Feet From The East	Line
Section 29	Townsh		Range 26E	NMPM Chaves	County
			er DF, RKB, RT, GR, etc.) 61' GR		
11.	Check Appropris		e Nature of Notice, R	enort, or Other Data	
NOTICE	OF INTENTION	ITO:		SEQUENT REPORT OF:	
PERFORM REMEDIAL WOR	K PLUG	AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHAN	GE PLANS	COMMENCE DRILLING		
PULL OR ALTER CASING			CASING TEST AND CE		
OTHER:			,	, perforate & treat Wolfca	mp X
12. Describe Proposed or Comwork) SEE RULE 1103.	pleted Operations (Clearly	state all pertinent details,		ding estimated date of starting any proposed	
10-10-91. Set 5041-5046' w/10 with 1000 gals 1	noies (2 SPF)	as follows: 5	0041, 42, 44, 45,	ireline and perforated Wol and 5046'. Acidized perf	fcamp orations
NOTE: CANCEL P&	A PROCEDURE PR	OPOSED 10-31-9	1 AND APPROVED BY	Y THE NMOCD 11-2-91.	
I hereby certify that the information	n above is true and complete to	the best of my knowledge an	nd belief.		
SIGNATURE Canal	a Sollie		Production Su	pervisor	
TYPE OR PRINT NAME	Juanita Goodle	tt	·	TELEPHONE NO. 505/	748-1471
٨	ORIGINAL SIGNED	_		JAN = 8	1002
APPROVED BY	SUPERVISOR, DIS	TRICI II	mue	DATE DATE	1337
CONDITIONS OF APPROVAL, IF ANY	:				