	_		- C15/	
Submit 3 Copies To Appropriate District	State of New	Mexico	- 	Form C-103
Office District I	Energy, Minerals and		l	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II 811 South First, Artesia, NM 88210	outh First, Artesia, NM 88210 OIL CONSERVATION DIVISION		30-005-63398	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE X FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505		6. State Oil & C	
87505				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name of	r Unit Agreement Name:
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Dallas AUE Ste	ate
PROPOSALS.) 1. Type of Well:				
Oil Well Gas Well X	Other	7 ?		
2. Name of Operator Yates Petroleum Corpore	ation /	55.7 2002	4 √7. Well No. 3	
3. Address of Operator	Allon .	RECEIVED GCD - ARTEON	8. Pool name or	Wildcat
105 S. 4 th Street Artesi	a, NM 88210	ANTESIA	Wildcat Pr	ecambrian
4. Well Location				
4. Wen Escation				
Unit Letter N: 660 feet from the South line and 1980 feet from the West line				
Section 35	Township 98 Rang		IPM Chaves	County
	10. Elevation (Show whether		c.)	
3832' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
<u> </u>	PLUG AND ABANDON	REMEDIAL WOR		ALTERING
	CHANGE PLANS	COMMENCE DRI		CASING PLUG AND
	MULTIPLE	CASING TEST A		ABANDONMENT
	COMPLETION	CEMENT JOB		
OTHER:		OTHER: Perforat	e and Acidize	\overline{X}
Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of				
starting any proposed work). SEE R				
recompilation.				
5/31/02-6/02/02 – Perforated B	asement zone with 2 JSF	PF from 6480'-6492'	(26 holes) and 65	90'-6604' (30 holes).
Acidized with 700 gals IC HCL acid with non-ionic surfactants.				
6/03/02 – Acidize perfs 6480'-6	492' with 600 gals of 7-1/	2" IC HCL.		
I hereby certify that the information	above is true and complete to	the best of my knowled	lge and belief.	
SIGNATURE Jina Huerta TITLE Regulatory Compliance Supervisor DATE June 5, 2002				
Type or print name Jina Huerta Telephone No. 505-748-1471				
(This space for State (1)				
11/21 /	RIGINAL SIGNED BY TIA			JUN 1 9 2002
APPPROVED BY / DISTRICT II SUPERVISOR LE DATE				