State of New Mexico	
Energy Minerals and Natural Resources Department	
OIL CONSERVATION DIVISION DISTRICT II P.O. Box 2088	30-025-21682
Sonto Ea New Maying 87504-2088	5. Indicate Type of Lease
DISTRICTIII	State X Fee
000 Rio Brazos Rd , Aztec NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
Type of Well* DIL GAS WELL OTHER X	Harris State SWD
Yates Petroleum Corporation	8. Well No. 1 19. Pool Name or Wildcat
3. Address of Operator 105 South 4th., Artesia, NM 88210	SWD Upper Penn
4. Well Location Unit Letter N 660 Feet From The South Line and 19/8	Feet From The West Line
Section 29 Township 13S Range 34E NMPM	Lea county
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4156.8' GR	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Ot	ther Data
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OF PULL OR ALTER CASING CASING TEST AND CEME	
 12. Describe Proposed or Completed Operations (Clearly state all pertient details, and give date of starting any proposed work) SEE RULE 1103. 4-4-02 MIRU wireline. TIH with 4-1/2" CIBP and set @ 10290'. Cap with 	
with 150 bbls 10# brine with 25#/bbl salt gel. Cut 4-1/2" casing @ 9850' 25 sx Class C cement with 2% CaCl2 @ 9900'. Tagged plug @ 8950'. 'Which is and 3-1/8" drill collars. Cleaned out stringers of cement open-ended to 9900' and pump 25 sx Class C cement. Tag cement @ 960'.	Casing did not move. Spotted Vorked down to 8990'. TOH, RD WL. TOH and lay down DC. TIH S90'. Cut 4-1/2" casing @ 6500'
Casing did not come loose. Ran free-point, casing free @ 3000 ⁴ . TIH ope Class C cement across cut casing @ 6500 ⁴ . Pull up to 4300 ⁴ and spot 25 up and WOC. Tag plug @ 3942 ⁴ . Lay down tubing to 1960 ⁴ and spot 25 s RUWL and perf 4 shots @ 358 ⁴ . Pump 130 sx cement. Circulated out 4-surface plug. Clean location, RD, and install regulation DH marker. Well	sx salt plug. Lay down all tubing. 1/2", 8-5/8". ND BOP. Top out
I hereby certify that the information above a trile and complete to the best of my knowledge and belief. SIGNATURE TITLE Regulat	tory Compliance Tech DATE 4/24/02
TYPE OR PRINT NAME Stormi Davis	TELEPHONE NO 505-748-1471
	MED DY
TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY OC. FIELD REP	RESENTATIVE II/STAFF MANAGEMAY 1 3 20
COMPANDING A LICED KELL	REGELALIZATION OF THE