

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Yates Petroleum Corporation		8. Farm or Lease Name Howard XY
3. Address of Operator 207 South 4th St., Artesia, NM 88210		9. Well No. 3
4. Location of Well UNIT LETTER <u>L</u> <u>1650</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>17</u> TOWNSHIP <u>7S</u> RANGE <u>32E</u> NMPM.		10. Field and Pool, or Wildcat Tomahawk SA
15. Elevation (Show whether DF, RT, GR, etc.) 4460' GR		12. County Roosevelt

16. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

1-8-85. Frac'd San Andres perforations 4038-4257' w/40000 gals 3% acid, 33500# 20/40 and 16500# 10/20 sand. Return to production.

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

SIGNED Jeremy Sexton TITLE Production Supervisor DATE 1-9-85
ORIGINAL SIGNED BY JEREMY SEXTON
DISTRICT 1 SUPERVISOR
APPROVED BY _____ TITLE _____ DATE _____
JAN 14 1985

RECEIVED

JAN 11 1985

O.C.D.
HOMES OFFICE