

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

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

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease  
State  Fee

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.)

OIL WELL  GAS WELL  OTHER

Name of Operator  
Yates Petroleum Corporation

Address of Operator  
207 South 4th St., Artesia, NM 88210

Location of Well  
UNIT LETTER L 1650 FEET FROM THE South LINE AND 330 FEET FROM  
THE West LINE, SECTION 17 TOWNSHIP 7S RANGE 32E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name  
Howard XY

9. Well No.  
3

10. Field and Pool, or WHdcat  
Tomahawk SA

15. Elevation (Show whether DF, RT, GR, etc.)  
4460' GR

12. County  
Roosevelt

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

OTHER \_\_\_\_\_

PLUG AND ABANDON

CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIAL WORK

COMMENCE DRILLING OPNS.

CASING TEST AND CEMENT JOB

OTHER \_\_\_\_\_

ALTERING CASING

PLUG AND ABANDONMENT

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.

Spudded 12-1/4" hole 7-15-84. Ran 42 jts of 8-5/8" 24# K-55 casing set 1680'. 1-Texas Pattern notched guide shoe set 1680'. Insert float set 1644'. Cemented w/ 600 sx Halliburton Lite, 1/4# flocele, 2% CaCl2. Tailed in w/200 sx Class C 2% CaCl2. Compressive strength of cement - 1250 psi in 12 hrs. PD 5:00 AM 7-17-84. Bumped plug to 1000 psi, released pressure, held okay. Cement circulated 20 sacks. WOC. Drilled out 5:00 PM 7-17-84. WOC 12 hrs. NU and tested to 1000 psi for 30 minutes, OK. Reduced hole to 7-7/8". Drilled plug and resumed drilling.

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

CHIEF *Guarita Goodlett* TITLE Production Supervisor DATE 8-2-84  
ORIGINAL SIGNATURE OF DISTRICT SUPERVISOR  
PROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

AUG - 9 1984

CONDITIONS OF APPROVAL, IF ANY: