State of New Mexico Submit 3 Copies Form C-103 to Appropriate District Office Energy, Minerals and Natural Resources Department Revised 1-1-89 DISTRICT I P.O. Box 1980, Hobba, NM 88240 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 2088 DISTRICT II P.O. Drawer DD, Artonia, NM 88210 30-025-25640 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATEX FEE ___ DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. V = 3917SUNDRY 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 or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS) Type of Well; WELL [WELL X OTNEH Chambers AQI State 2. Nume of Operator 8. Well No. YATES PETROLEUM CORPORATION 3. Address of Operator 9. Pool name or Wildcat 105 South 4th St., Artesia, NM Townsend Permo Upper Penn 4. Well Location Unit Letter 1 : 1980 Feet From The South Line and 660 Feet From The Line Section Township 15S **NMPM** Range Lea Counts 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3982.31 KB Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: OTHER: Production string 12. Describe Proposed or Completed Operations (Clearly state all persinent desails, and give persinent dates, including estimated date of starsing any proposed work) SEE RULE 1103. 2-1-3-97 - TOOH with RBP. TIH with production tubing as follows: bull plug, perforated sub, seating nipple set at 10603', 27 joints of 2-7/8" tubing, 5-1/2" tubing anchor and 310 joints of 2-7/8" tubing. Nippled down BOP. Set tubing anchor at 9750'. Flanged up wellhead. Rigged down pulling unit. Released well to production department.

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I hereby certify that the information above is true and complete to the best of my knowledge and bellef.		
SIGNATURE Kusty Hun	nns Operations Technician	PATE Feb. 10, 1997
TYPEOR PRINT NAME RUSTY Klein		ты емиона но. 505/748—1471
(This space for State Use)		
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APPROVED BY	am	DATE

CONDITIONS OF AITEROVAL, IF ANY: