## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Linerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	OT CONCEDI	ATION DIVISION	THE LANGE NO		
DISTRICT I	OIT CONSER	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240	P.U.			30-025-27981	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New	Mexico 8/304-2000		ATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease N V-173	a.	
		ON WELLS	V/////////////////////////////////////		
( DO NOT USE THIS FORM FOR PE	FICES AND REPORTS ROPOSALS TO DRILL OR TO PROPOSALS TO DRILL OR TO C-101) FOR SUCH PROPOS	N FOR PERMIT"	7. Lease Name or Unit Agr		
1. Type of Well:			Valentine VL St	ate	
MEIT X MEIT	OTHER	Workover	8. Weil No.		
2 Name of Operator YATES PETROLEUM CORPO	RATION		9. Pool name or Wildcat		
3. Address of Operator 105 South 4th St., Ar	tesia, NM 88210		Saunders Permo	Upper Penn	
4. Well Location		outh Line and 165	Feet From The	West Line	
	Township 15S_	Range 33E	NMPM Lea	County	
Section 10	10. Elevation (S	how whether DF, RKB, RT, GR, etc.)	<i>\\\\\</i>	/////////	
<i>\                                    </i>	//////	4188.4' GR	Demont on Other Data		
Chec	k Appropriate Box to	Indicate Nature of Notice,	Report, or Outer Date	DT OF:	
NOTICE OF I	NTENTION TO:	SU	BSEQUENT REPO		
<u></u>		ON SENEDIAL WORK	ALTE	RING CASING	
PERFORM REMEDIAL WORK	PLUG AND ABAND		NO CONS PLUG	AND ABANDONMENT	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLI			
PULL OR ALTER CASING	]	CASING TEST AND	CEMENT JOB		
OTHER: Perforate, Treat	Wolfcamp	X OTHER:		ne any proposed	
12. Describe Proposed or Completed O work) SEE RULE 1103.	perations (Clearly state all perti	nens details, and give pertinens dates, in	cluding estimated date of starta	any proposes	
Propose to add perfor	9591' (12 shots). 9201' (16 shots).	p as follows: Treat w/1200 gals 1 Treat w/1600 gals 2 n well to production.	0% NeFe acid.		
I hereby certify that the information above	e is true and complete to the best of r	my mowedge and selection	Supervisor	DATE	
SIGNATURE CONTACT	X volume	INLE -		TELEPHONE NO. 505/748-147	
TYPE OK PRINT NAME	níta Goodlett			- 4001	
11)	s. Signed by, aul Kauta Geologist	mu		NOV 0 6 1991	
	MANAGE TO THE PARTY OF THE PART				