

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG 958

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
Name of Operator Yates Petroleum Corporation
Address of Operator 207 South 4th St., Artesia, NM 88210
Location of Well UNIT LETTER M 330 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 11 TOWNSHIP 15S RANGE 33E N.M.P.M.

7. Unit Agreement Name
8. Farm or Lease Name Laddie WC State
9. Well No. 1
10. Field and Pool, or Wildcat Saunders Permo-Upper Per

15. Elevation (Show whether DF, RT, GR, etc.) 4178' GR

12. County Lea

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 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"/>	OTHER <input checked="" type="checkbox"/> Drilling Status

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Drilling with Cable Tool rig.
TD 30'.
2-13-83 - Drilling 40'. Made 10'.
2-14-83 - Drilling 50'. Made 10'.
2-15-83 - Drilling 60'. Made 10'.
2-16-83 - Drilling 70'. Made 10'.

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

SIGNED Jerry Sexton TITLE Production Supervisor DATE 2-23-83

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE FEB 28 1983

RECEIVED
FEB 25 1983
C. C. HOBBS
HOBBS OFFICE