State of New Mexico Energy, anerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	
30-025-28132	
5. Indicate Type of Lease STATE X	FEE

6. State Oil & Gas Lease No. DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 LG 5422 SUNDRY 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: Robin UT State WORKOVER WELL X OTHER WELL. 8. Well No. 2. Name of Operator YATES PETROLEUM CORPORATION 9. Pool name or Wildcat 3. Address of Operator Saunders Permo Upper Penn 88210 105 South 4th St., Artesia, NM 4. Well Location West 1980 Line Feet From The South 660 Line and _ Feet From The **NMPM** Lea 33E 15S Range 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Township Section

\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	G' GR	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
Check Appropriate Box to India NOTICE OF INTENTION TO:	ate Nature of Notice,	JBSEQUENT REPORT OF		
PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON CHANGE PLANS	REMEDIAL WORK COMMENCE DRILLI		MENT	
PULL OR ALTER CASING OTHER: Perforate & treat Wolfcamp	CASING TEST AND X OTHER:	CEMENT JOB		
OTFER				

12. 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.

Propose to perforate and treat Wolfcamp zone as follows:

Wolfcamp Lime: 9441-9811' w/54 shots. Wolfcamp Dolo: 9216-9230' w/12 shots.

Acidize perforations as follows:

9751-9811 $\mbox{w}/1200$ gals 15% NEFE HCL acid.

9682-9697' w/1000 gals 15% NEFE HCL acid.

9584-9638' w/1600 gals 15% NEFE HCL acid.

9441-9502' w/1600 gals 15% NEFE HCL acid.

APPROVED BY				
(This space for State Use)	Paul Kautz Geologist,	TIME -	DATE	
TYPE OR PRINT NAME	Juanita Goodlett		TELEPHONE NO. 505/748-147	
I hereby certify that the inform	ation above is true and complete to the best of t	my knowledge and belief. TILE Production Supervisor	DATE11-5-91	
Propose to leav	e RBP at 9840' and put	t well on pump - return to production	on.	
9216-9230' w/12	00 gals 20% NEFE HCL a	acid.		