Submit 3 Copies to Appropriate District Office

## State of New Mexico Ainerals and Natural Resources Department Ener,

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION P.O. Box 2088

Santa	Fe,	New	Mexico	8750	4-2088
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WELL API NO. 30 025-28132	_
6 Indicate Tame of Leans	

P.O. Drawer DD, Artesia, NM 88210	STATE X FEE				
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. LG 5422				
SUNDRY NOTICES AND REPORTS ON WEL ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PER (FORM C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A 7 Lease Name or Unit Agreement Name				
1. Type of Well: OIL OAS WELL XX WELL OTHER	Robin UT State				
2. Name of Operator YATES PETROLEUM CORPORATION	8. Well No.				
3. Address of Operator 105 South 4th St., Artesia, NM 88210	9. Pool name or Wildcat Saunders Permo Upper Penn				
4. Well Location  Unit Letter N 660 Feet From The South	Line and $\frac{1980}{}$ Feet From The West Line				
Section 10 Township 15S Rat					
10. Elevation (Show whether by 4186.5	OF, RKB, RT, GR, etc.)  O' GR				
11. 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: Remedial work, and acidize well X				
12. Describe Proposed or Completed Operations (Clearly state all persinent details, an work) SEE RULE 1103.	d give persinent dates, including estimated date of starting any proposed				
Existing perforations: 9865-79' (1050'					
9928-74' (2250' 7-25-90. WIH w/tubing, pkr, RBP. Set RBP ( holes. Moved packer to surface. Testing of the control of the c	28000' and tested to 2000#. Test casing for with no casing leak. Tested to 1000#.  w/5000 gals 20% NEFE acid.  w/2000 gals 20% NEFE acid.  n string.				
I hereby certify that the information above is true and complete to the best of my knowledge and	belief.  Production Supervisor DATE 8-23-90				

Juanita Goodlett TYPE OR PRINT NAME (This space for State Use) APPROVED BY-