

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-31567 31526
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-2252

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.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name EKay 27 State
2. Name of Operator Harvey E. Yates Company	8. Well No. #1
3. Address of Operator P.O. Box 1933, Roswell, N.M. 88202	9. Pool name or Wildcat Tonto Deep Wolfcamp
4. Well Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 27 Township 18S Range 34E NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4012.5 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	SUBSEQUENT REPORT OF:
NOTICE OF INTENTION TO:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Drlg w/cable tool <input checked="" type="checkbox"/>

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.

4/4/92 Drld 5' w/cable tool, TD 18 1/2'

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

SIGNATURE Vickie Teel TITLE Drlg/Prod Analyst DATE 4/6/92  
TYPE OR PRINT NAME Vickie Teel TELEPHONE NO. 623-6601

(This space for State Use)

ORIGINAL FILED BY JERRY SEXTON

APR 08 '92

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: