Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT 1 P.O. Box 1980, Hobba, NM 88240 P.O. Box 2088	
DISTRICT II Santa Fe, New Mexico 1 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELL (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 GAS WELL X OTHER	
2. Name of Operator	8. Well No.
ORYX ENERGY COMPANY	9. Pool name or Wildcat
3. Address of Operator P.O. BOX 2880, DALLAS, TX 75221-2880	EUMONT YATES 7 RVS QN(PRO GAS)
P.O. BOX 2880, DALLAS, TX 75221-2880 EUMONT YATES 7 RVS QN(PRO GAS) 4. Well Location Unit Letter : 1850 Feet From The SOUTH Line and 6600 Feet From The WEST Line	
Unit Latter : 1000 Feet From The	County
Section 7 Township 20 Range 37E NMPM LEA	
10. Elevation (Show whether to 3551	
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 PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON LI CHANGE PLANS LI	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB [X]
OTHER:	OTHER:
12. Describe Proposed or Completed Operations (Clearly state all persinent details, and give persinent dates, including estimated date of starting any proposed work) SEE RULE 1103.	
10/05/95 SPUD DATE SET SURF CSG 12 JTS 8 5/8" 24# TO 510' CMT W/ 300 SXS - CIRC 75 SXS TO PIT 12 HRS WOC 10/06/95 12 HRS WOC CONT. DRILLING 10/14/95 SET LONG STRING CASING 83 JTS 5 1/2" 15.5# TO 3682.15'	
CMT W/ 500 SXS "C" TAIL W/ 265 "C" DISP W/ 85 BBLS 3% KCL WTR CIRC 120 SX TO PIT 10/17/95 MIRU COMPLETION RIG	
I hereby certify that the infortifiation above is true and complete to the best of my knowledge and	
SIGNATURE SIN MOINTEN	STAFF PRORATION ANALYST DATE 11/17/95
TYPE OR PRINT NAME ROD L. BAILEY	TELEPHONE NO.214 715-4828
(This space for State Use) DEC 14 1995	
APPROVED BYTTT	1E DATE