Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

ate of New Mexico Energy, Mineras and Natural Resources Department

Form C-103 Revised 1-1-89

District Office				
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. 30-025-31576 5. Indicate Type of Lease STATE X FEE	
(DO NOT USE THIS FORM FOR E	OTICES AND REPORTS ON WARDPROPOSALS TO DRILL OR TO DEEP SERVOIR. USE "APPLICATION FOR IN C-101) FOR SUCH PROPOSALS.)	EN OR PLUG BACK TO A	7. Lease Name or Unit A	Agreement Name
1. Type of Well: OIL GAS WELL X WELL	CITIER		Kiwi AKX Stat	te
2. Name of Operator YATES PETROLEUM CORP	ORATION		8. Well No.	
3. Address of Operator 105 South 4th St., A		·	9. Pool name or Wildcan East Livingsto	on Ridge Delaware
4. Well Location Unit Letter P : 3	30 Feet From The South	Line and 33	Feet From The	East Line
Section 16	Township 22S	Range 32E	NMPM Lea	County
	10. Elevation (Show wheth	ther DF, RKB, RT, GR, etc.) GR		
11. Che	ck Appropriate Box to Indica	te Nature of Notice, I	Report, or Other Da	ta
NOTICE OF	INTENTION TO:	SUI	BSEQUENT REP	ORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALT	ERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.			IG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND	EMENT JOB	· · · · · · · · · · · · · · · · · · ·
OTHER:		OTHER: Inter	mediate Casing	<u>k</u> _
work) SEE RULE 1103. TD 11" hole 4:30 A shoe set 4535'. I 205 sx PSL w/1/4# sx "C" with 2% Ca0 900 sx PSL w/1/4# sx "C" with 2% Ca0 WOC. NOTE: Well and afterward. No	Operations (Clearly state all pertinent details AM 5-5-92. Ran 102 jts Float collar set 4491'. Celloseal, 10# salt, 5: Cl2 (yield 1.33, wt 14.62 (yield 1.	8-5/8" 32# S-80 DV tool set 317 # Gilsonite (yiel 8). PD 2:30 PM 5 # Gilsonite (yiel .8). PD 5:00 PM r while running c , Hobbs, NM, prio	and J-55 casing 5'. Cmtd' in 2 d 1.94, wt 12.9 -5-92. Circula d 1.94, wt 12.(5-5-92. Circu asing and prior r to cementing.	set 4535'. Guide stages: Stage 1:).Tailed in w/200 ted 200 sacks. Stage). Tailed in w/100 lated 144 sacks Dead after 1st sta Did not witness.
I hereby certify that the information above	ve is true and complete to the best of my knowled			
SIGNATURE CONTES	Doublest _	_ mre Production	Supervisor	DATE 5-12-92
TYPE OR PRINT NAME Jus	nita Goodlett			TELEPHONE NO. 505/748-1471
	NO FULL BY BEARY SEXTON			MAY 1 3 '92
APPROVED BY		_ TITLE	<u></u>	- DATE