

District I

1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II

1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III

1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit20792

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NUMBER 30-015-34246
		5. Indicate Type of Lease P
		6. State Oil & Gas Lease No.
1. Type of Well: ☐		7. Lease Name or Unit Agreement Name SQUIRES ALR
2. Name of Operator YATES PETROLEUM CORPORATION		8. Well Number 002
3. Address of Operator 105 S 4TH ST , ARTESIA , NM 88210		9. OGRID Number 25575
4. Well Location Unit Letter <u>I</u> : <u>2050</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>E</u> line Section <u>12</u> Township <u>24S</u> Range <u>30E</u> NMPM <u>Eddy</u> County		10. Pool name or Wildcat
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3536 GR		
Pit or Below-grade Tank Application ☐ or Closure ☐ Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 Other: _____

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
 COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
 CASING/CEMENT JOB ☐
 Other: **Spud** ☒

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/2/2006 Spudded well.

1/2/06 Spudded 26" hole at 4:00 PM. Set 40' of 20" conductor and cemented.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Regulatory Agent DATE 1/4/2006

Type or print name Debbie Caffall E-mail address debbiec@ypcnm.com Telephone No. 505-748-4376

For State Use Only:

APPROVED BY: Bryan Arrant TITLE Geologist DATE 1/5/2006