| Submit 3 Copies To Appropriate District Office | State of New | | | Form C-103 | |
|--|--|------------------------|--------------------------------------|-------------------------|--|
| District I | Energy, Minerals and Natural Resources | | Revised June 10, 2003 WELL API NO. | | |
| .1625 N. French Dr., Hobbs, NM 88240 District II | OII CONCEDIATI | ION DIVICION | 30-015-33036 | | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | OIL CONSERVAT | | 5. Indicate Type of | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. Santa Fe, NM 87505 | | STATE | FEE X | |
| <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM | | | 6. State Oil & Ga | 3 Lease No. | |
| 87505 | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit Agreement Name | | |
| (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 | | | De | Desiree BDS | |
| PROPOSALS.) | | | 8. Well Number | | |
| 1. Type of Well: Oil Well Gas Well X Other | | | 1 | | |
| 2. Name of Operator | Other | RECEIVED | 9. OGRID Numbe | | |
| Yates Petroleum Corporation | | MAR 1 8 2004 | | 025575 | |
| 3. Address of Operator 105 S 4 th Street, Artesia, NM 88210 OCD-ARTESIA | | | 10. Pool name or Wildcat | | |
| 105 S. 4 th Street, Artesia, NM 88210 OCD-ARTESIA Wildcat Chester 4. Well Location | | | | | |
| 4. Well Location | | | | | |
| | | | | | |
| Unit Letter O: 660 | feet from the So | outh line and | feet from th | e <u>East</u> line | |
| Section 34 | Township17S | Range 26E | NMPM Edd | y County | |
| | 1. Elevation (Show whether | DR, RKB, RT, GR, etc | :.) | | |
| 3804'GR | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | |
| NOTICE OF INTE | | REMEDIAL WOR | SSEQUENT REF | | |
| PERFORM REMEDIAL WORK F | PLUG AND ABANDON | REMEDIAL WOR | KK | ALTERING CASING | |
| TEMPORARILY ABANDON [] (| CHANGE PLANS | COMMENCE DR | RILLING OPNS. | PLUG AND ABANDONMENT | |
| — | MULTIPLE [] | CASING TEST A | AND | , IS, IVE ON INIERY | |
| | COMPLETION | | | | |
| OTHER: | L | | letion Operations | X X | |
| 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. | | | | | |
| 3/1/04 - TOC 2600' CBL. Perforate Morrow 8714'-8740' and 8762'-8776' with 24242" holes. Set packer at 8483'. | | | | | |
| 3/2/04 – Acidize Morrow 2000g 7-1/2% IC HCL and balls. | | | | | |
| 3/8/04 – Frac Morrow with a binary foam + 50,000# 20/40 Carbolite sand. | | | | | |
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| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | | |
| SIGNATURE: | | | | | |
| Type or print name Tina Huerta | - 406 E -m | ail address: tinah@vpo | enm.com Tele | ephone No. 505-748-1471 | |
| (This space for State use) | 4 for record - William | | | | |
| A DDDD OVED DV | En | 7 | | | |
| APPPROVED BY Conditions of approval, if any: | TITLI | 3 | | DATE | |