

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
March 4, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-005-63316
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L-6811
7. Lease Name or Unit Agreement Name Horizon AWH State
8. Well Number 1
9. OGRID Number 025575
10. Pool name or Wildcat Pecos Slope Abo

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 ☐ Gas Well ☒ Other

2. Name of Operator
Yates Petroleum Corporation

3. Address of Operator
105 South Fourth Street, Artesia, NM 88210

4. Well Location
Unit Letter A : 1200 feet from the North line and 660 feet from the East line
Section 16 Township 9S Range 26E NMPM Chaves County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3768'GR

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL Sect Twp Rng Pit type Depth to Groundwater Distance from nearest fresh water well

Distance from nearest surface water Below-grade Tank Location UL Sect Twp Rng ;
feet from the line and feet from the line

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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: Perforate additional Silurian, plugback and recomplete to Abo <input checked="" type="checkbox"/>

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.

5/20/04 - Perforate Silurian 5944'-5970', 5976'-5988' and 5992'-6012' with 232 - .42" holes. Frac Silurian 5944'-6070' with 108,000g brine carrying 50,000# Liteprop-125 14/30 + 4000g 7-1/2% HCL. Well pressured out when sand hit. Only got 1050# sand in formation.
5/28-31/04 - Pump 20,000g 20% gelled IC HCL and 10,000# 20/40 resin coated Super LC sand.
6/4-6/04 - Set CIBP at 5890' + 35' cement. Set composite plug at 5310'.
6/7/04 - Perforate Abo 4420'-4424', 4430'-4432', 4478'-4490', 4494'-4502', 4508'-4514', 4584'-4594', 4616'-4622' and 4682'-4696' with 70 - .42" holes. Spotted 2500g 7-1/2% IC HCL. Frac Abo with 52% Medallion CO2 carrying 250,000# 16/30 sand. Set packer at 4357'.

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: Jina Huerta TITLE: Regulatory Compliance Supervisor DATE: June 22, 2004
Type or print name Tina Huerta E-mail address: tinah@ypcnm.com Telephone No. 505-748-1471

(This space for State use)
APPROVED BY TITLE DATE
Conditions of approval, if any: