

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |                                     |
|------------------------|-------------------------------------|
| NO. OF COPIES RECEIVED |                                     |
| DISTRIBUTION           |                                     |
| SANTA FE               | <input checked="" type="checkbox"/> |
| FILE                   | <input checked="" type="checkbox"/> |
| U.S.G.S.               |                                     |
| LAND OFFICE            |                                     |
| OPERATOR               | <input checked="" type="checkbox"/> |

OIL CONSERVATION DIVISION  
RECEIVED BY P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
FEB 27 1987  
O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease  
State  Fee   
5. State Oil & Gas Lease No.  
E-1051

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>  | 7. Unit Agreement Name                              |
| 2. Name of Operator<br>John A. Yates, Jr.   | 8. Farm or Lease Name<br>Gulf State                 |
| 3. Address of Operator<br>207 So. 4th St., Artesia, NM 88210  | 9. Well No.<br>1                                    |
| 4. Location of Well<br>UNIT LETTER <u>B</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>8</u> TOWNSHIP <u>19S</u> RANGE <u>28E</u> NMPM. | 10. Field and Pool, or WHcat<br>Artesia-Queen-GB-SA |
| 15. Elevation (Show whether DF, RT, GR, etc.)   | 12. County<br>Eddy                                  |

16. 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"/>                 | CASING TEST AND CEMENT JOB <input type="checkbox"/>                          |
|  | PLUG AND ABANDONMENT <input type="checkbox"/>                                |
|  | OTHER <u>Returned well to production</u> <input checked="" type="checkbox"/> |

17. 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.

2-6-87. Tested tubing - found leak in 1 joint and replaced with new joint. Circulate water with hot oiler through flow line to tank battery. Circulate down backside through tubing to tank battery. Set pumping equipment. Began pumping well 2-7-87.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED My Anita Goodlett TITLE Production Supervisor DATE 2-25-87

Original Signed By  
Mike Williams  
Oil & Gas Inspector

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB 27 1987

CONDITIONS OF APPROVAL, IF ANY: