

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  
May 27, 2004

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

WELL API NO. 30-015-33395
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> C.I.D. <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name Lake Shore XH Federal Com
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	8. Well Number 2	9. OGRID Number 025575
2. Name of Operator Yates Petroleum Corporation	3. Address of Operator 105 S. 4 <sup>th</sup> Street, Artesia, NM 88210	10. Pool name or Wildcat Burton Flat Morrow
4. Well Location Surf-Unit Letter F : 2100 feet from the North line and 2271 feet from the West line BHL-Unit Letter A : 660 feet from the North line and 660 feet from the East line Section 11 Township 21S Range 26E NMPM Eddy County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3191'GR		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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 <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Production casing <input checked="" type="checkbox"/>
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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.

9/2/04 – TIH with directional tools. Directional drilling starting from 5500' to TD.  
10/11/04 – TD 8-3/4" hole 11,910' at 7:45 AM. Set 5-1/2" 17# & 20# HCP-110 casing at 11,910'. Float collar at 11,866'. Cemented stage 1 with 895 sx 15:61:11 + .6% FL-23 + .6% FL-52 + 1% BA-10 + 5# LCM (yld 1.59, wt 13.2). Stage 2 with 1320 sx 35:65:6 "C" + 5% FL-52 + 5# LCM (yld 1.95, wt 12.5). Tailed in with 100 sx Class "H" Neat (yld 1.18, wt 15.6).

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 Tina Huerta TITLE Regulatory Compliance Supervisor DATE October 22, 2004

Type or print name Tina Huerta E-mail address: tinah@ypcnm.com Telephone No. 505-748-1471

For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE OCT 27 2004  
Conditions of Approval (if any): FOR RECORDS ONLY