| Submit 3 Copies To Appropriate District | | | | Form C-103 |
|--|--|-------------------------|----------------------------------|-----------------------|
| Office District I | Energy, Minerals and Natural Resources | | May 27, 2004 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| District II 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 30-005-63698 | |
| District III | 1220 South St. Francis Dr. | | 5. Indicate Type of Lease | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | ·- | | | EE |
| District IV | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease N | No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | |
| | ICEC AND REPORTS ON WELL | | 7 Logo Nama or Unit Am | rooment Nome |
| 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 | | | 7. Lease Name or Unit Ag | reement Name |
| | | | Upright BFU Sta | to Com |
| PROPOSALS.) | | | 8. Well Number | te Com |
| 1. Type of Well: Oil Well | Gas Well 🖂 Other | RECEIVED | o. Well Number | |
| 2. Name of Operator | | | 9. OGRID Number | |
| Yates Petroleum Corporat | ion | DEC - 9 2004 | 025575 | |
| 3. Address of Operator | | OCU-ARTERIA | 10. Pool name or Wildcat | |
| 105 S. 4 th Street, Artesia, | | | Undesignated Pred | cambrian |
| 4. Well Location | | | | |
| Unit Letter H : | 1980 feet from the Nort | h line and | feet from the | East line |
| | | | | |
| Section 30 Township 10S Range 26E NMPM Chaves County | | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3778'GR | | | | |
| Pit or Below-grade Tank Application | | , OK | | |
| Pit type Depth to Groundwate | | vator well Diet | ance from nearest surface water | |
| i | | | | |
| 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: SUBSEQUENT REPORT OF: | | | | |
| | | | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORITED | | | | NG CASING |
| TEMPORARILY ABANDON | | | | ND ABANDON 🗌 |
| POLL OR ALTER CASING | MULTIPLE COMPL | CASING/CEIVIEN I | JOB LI | |
| OTHER: | | OTHER: Spud | | \boxtimes |
| | oleted operations. (Clearly state all | | give pertinent dates, includ | |
| | ork). SEE RULE 1103. For Multip | | | |
| or recompletion. | | | | |
| | | | | |
| 11/30/04 - Spudded 12-1/4" hole at | 10:45 AM. TD 10'. | | | |
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| I hereby certify that the information | above is true and complete to the b | est of my knowledge | and belief. I further certify th | nat any pit or below- |
| grade tank has been/will be constructed o | r closed according to NMOCD guidelines | 🔲, a general permit 🔲 🤆 | or an (attached) alternative OCD | -approved plan 🔲. |
| SIGNATURE 1. | TITLE Regul | -4 C1: C | namian DATE Da | 1 0 2004 |
| SIGNATURE | TILE Regul | atory Compilance Su | pervisor DATE Dec | ember 8, 2004 |
| Type or print nameTina Hue | rta E-mail address: | tinah@ypcnm.co | m Telephone No. | 505-748-1471 |
| -JF F MMM THO | 2 mmi addites. | | rerephone 140 | |
| For State Use Only | OR RECORDS ON THE | | | DEC 1 3 2004 |
| | TITLE_ | | DATE_ | |
| Conditions of Approval (if any): | - | | | |