

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

MAY 10 1989

WELL API NO.
30-015-25183

5. Indicate Type of Lease
STATE ☐ FEE ☒

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.)

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER Recompletion

2. Name of Operator
YATES PETROLEUM CORPORATION

3. Address of Operator
105 South 4th St., Artesia, NM 88210

4. Well Location
Unit Letter 0 : 990 Feet From The South Line and 1650 Feet From The East Line

Section 33 Township 17S Range 25E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3552' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: Set CIBP, perforate, treat ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

Propose to blow well down, unset packer, install BOP. POOH.
Set CIBP at 8000' w/35' cement cap. Perforate Cisco at 6492-98; 6551-54; 6627, 28, 29,
33, 34, 38, 39' (1 SPF-total 18 holes). RIH w/tubing and RTTS, spot acid at 7705, set packer
at 7612' and retreat perforations 7701-06' w/1500 g. 15% MCA, flush and overflush, total of
55 bbls 1% KCL. Swab back load and evaluate. POOH.
RIH w/tubing, packer and RBP, set RBP at about 6670' and test. Spot acid as follows:
Straddle perms 6627-39, treat w/1250 g. 15% NEFE acid + 6 ball sealers.
Straddle perms 6551-54, treat w/750 g. 15% NEFE + 3 ball sealers.
Straddle perms 6492-98, treat w/1500g. 15% NEFE + 6 ball sealers.
Straddle perms 6492-6639', swab back load and evaluate.

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

SIGNATURE Juanita Goodlett TITLE Production Supervisor DATE 5-8-89

TYPE OR PRINT NAME Juanita Goodlett

TELEPHONE NO. 505/748-1471

(This space for State Use)

Original Signed By
Mike Williams

MAY 12 1989

APPROVED BY

TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: