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OIL CONSERVATION DIVISION

P. O. BOX 208
SANTA FE, NEW MEXICO 87501

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DEC 14 1983

O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

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.)

OIL
WELL ☐

GAS
WELL ☒

OTHER ☐

Name of Operator

Yates Petroleum Corporation

Address of Operator

207 South 4th St., Artesia, NM 88210

Location of Well

UNIT LETTER G 1650 FEET FROM THE North LINE AND 2310 FEET FROM
THE East LINE, SECTION 21 TOWNSHIP 18S RANGE 26E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

3378' KB

5a. Indicate Type of Lease

State ☐For ☒

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name

Dayton Townsite Gas Co.

9. Well No.

1

10. Field and Pool, or Whichever
Atoka Penn

12. County

Eddy

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 ☐REMEDIAL WORK ☐COMMENCE DRILLING OPNS. ☐CASING TEST AND CEMENT JOBS ☐OTHER ☐ALTERING CASING ☐PLUG AND ABANDONMENT ☐OTHER ☒ Perforate additional Morrow

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.

Well is depleted in original Morrow perforations 8978-92 and 9045-62. Propose to set a CIBP at about 8950', perforated and stimulate Upper Morrow at 8901-14, return well to production.

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

SIGNED Leslie A. ClementsTITLE Production SupervisorDATE 12-12-83

Original Signed By

Leslie A. Clements

TITLE Supervisor District II

APPROVED BY _____

DATE DEC 15 1983

CONDITIONS OF APPROVAL, IF ANY:

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OIL CONSERVATION DIVISION

 P. O. BOX 2088
 SANTA FE, NEW MEXICO 87501

FEB 20 1984

 O. C. D.
 ARTESIA, OFFICE

 Form C-103
 Revised 10-1-79

 5a. Indicate Type of Lease
 State ☐ Free ☒
 5. 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.)

OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Yates Petroleum Corporation ✓			8. Farm or Lease Name Dayton Townsite Gas
Address of Operator 207 South 4th St., Artesia, NM 88210			9. Well No. 1
Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>21</u> TOWNSHIP <u>18S</u> RANGE <u>26E</u> NMPM.			10. Field and Pool, or Wellcat Atoka Penn
11. Elevation (Show whether DF, RT, GR, etc.) 3378' GR KB			12. County Eddy

 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Perforate additional Morrow</u> <input checked="" type="checkbox"/>

7. 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.

Set CIBP at 8950' w/10' cement on top. WIH and perforated 8902-8914' w/48 .50" holes (4 SPF). Acidized perforations 8902-14' w/1500 gallons 7½% MS acid, 1000 SCF N₂/bbl. Packer set at 8860' with on/off tool set 8853'. Re-acidized perforations 8902-14' w/5000 gallons 7½% MS acid and CO₂. 96 hour SITP at 900#. Blew well down on 1/4" choke - stabilized at 10#. Shut in for pressure build up.

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

SIGNED <u>Leslie A. Clements</u>	TITLE <u>Production Supervisor</u>	DATE <u>2-14-84</u>
Original Signed By Leslie A. Clements		
APPROVED BY _____	TITLE <u>Supervisor District II</u>	DATE <u>FEB 23 1984</u>
CONDITIONS OF APPROVAL, IF ANY:		