



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON

Governor
Betty Rivera
Cabinet Secretary

Lori Wrotenbery
Director
Oil Conservation Division

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Yates Petroleum Corporation
105 South 4th Street
Artesia, New Mexico 88210

Form C-103 Report of Plugging for your WLHU Tr 25 # 1 K-1-18-29 API 30-015-03232
Cannot be approved until an NMOCD representative has made an inspection of the location and found it to be cleared to comply with OCD rules and regulations. Please check each item in the space provided to indicate that the work has been accomplished and the location is ready for final inspection.

- Completed*
- ☒ 1. All pits have been filled and leveled.
 - ☒ 2. Rat hole and cellar have been filled and leveled.
 - ☒ 3. A steel marker 4" in diameter and approximately 4' above mean ground level has been set in concrete to mark the exact location of the plugged well. (Marker must have operator name, lease name, well number and location including quarter/quarter section or unit letter, section, township, range and API well ID number permanently welded, stamped or otherwise engraved into the metal marker.)
 - ☒ 4. The location has been leveled as nearly as possible to original top ground contour and has been cleared of all junk and equipment.
 - ☒ 5. The dead men and tie downs have been cut and removed.
 - ☒ 6. If a one well lease or last remaining well on lease, the battery and burn pit locations have been leveled and cleared of all junk & equipment.
 - ☒ 7. All environmental concerns have been addressed as per OCD guidelines.

The above are minimum requirements and no plugging bond will be cancelled until all locations for plugged and abandoned wells have been inspected and Form C-103 approved.

When all of the work outlined above has been done, please notify this office by completing, signing and returning this letter to us so that our representative will not have to make more than one trip to the location.

I certify that the above work has been done and the above-mentioned lease is ready for OCD inspection and approval.

[Signature]
Name

DELEG SUPV
Title

[Signature]
Van Barton
Field Rep. II