

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

WELL API NO.

30-015-21037

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

K-3971

7. Lease Name or Unit Agreement Name

Laguna Seca

8. Well No.

1

9. Pool name or Wildcat LOCO  
Qn-G-SA

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

MAY 22 '89

2. Name of Operator

Yates Drilling Company

C. C. D.

3. Address of Operator

105 South 4th Street, Artesia, N.M.

ARTESIA, OFFICE

4. Well Location

Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line

Section 23

Township 18S

Range 29E

NMPM

Eddy

County

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

3470' 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: Perforate additional holes ☒

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.

We propose to perforate additional holes in the Grayburg, as follows:

10 holes from 2735' to 2820'.

Acidize with 1000 gel HCL.

Swab test and frac, if necessary.

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

SIGNATURE

*John R. Reed*

TITLE Engineer

DATE 5-17-89

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Original Signed By  
Mike Williams

APPROVED BY

TITLE

DATE

MAY 23 1989

CONDITIONS OF APPROVAL, IF ANY: