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State of New Mexico
Energy, Minerals and Natural Resources Department
AUG 09 1991
O. C. D.
ARTESIAN OFFICE

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

Submit 3 Copies
to Appropriate
District Office

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

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

E-1392

7. Lease Name or Unit Agreement Name

Travis Penn Unit

8. Well No.

#5

9. Pool name or Wildcat

Travis Upper Penn

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

2. Name of Operator

Harvey E. Yates Company

3. Address of Operator

P.O. Box 1933, Roswell, N.M. 88202

4. Well Location

Unit Letter K : 1780 Feet From The South Line and 2080 Feet From The West Line

Section 13 Township 18S Range 28E NMPM Eddy County

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

3585.5 GL

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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: 24 hr notice ☒

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.

Will call 24 hrs prior to moving on.

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

SIGNATURE Tim Gum

TITLE Engineer

DATE 8/8/91

TYPE OR PRINT NAME Tim Gum

TELEPHONE NO. 8/8/91

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____

DATE AUG 13 1991

CONDITIONS OF APPROVAL, IF ANY: