Form C-103 State of New Mexico Revised 1-1-89 Ainerals and Natural Resources Department Submit 3 Copies Enery to Appropriate District Office OIL CONSERVATION DIVISION WELL API NO. DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-015-28343 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease FEE XX P.O. Drawer DD, Artesia, NM 88210 STATE 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aziec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Dayton EZ WELL X OTHER WELL 8. Well No. 2. Name of Operator YATES PETROLEUM CORPORATION 9. Pool name or Wildcat 3. Address of Operator Atoka San Andres 105 South 4th St., Artesia, NM 4. Well Location East Line 990 Feet From The North Line and 2310 Feet From The Unit Letter County NMPM Eddy 26E **18S** Range 21 Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Section 3558' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: 11. NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING OTHER: Frac perforations 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.

3-4-6-95 - Frac'd perforations 1574-1637' (San Andres) with 100000 gallons 30# crosslink gel and 200000# 20-40 Brady sand. Force closed well for 30 minutes. Shut well in for 4 hours. Opened well to pit. TIH with 2-7/8" tubing and tagged sand at 1656'. Reversed casing clean to 1718'. TOOH with 2-7/8" tubing. Released to production to hang well on pump.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Production Clerk	рате 3-6-95
SKONATURE PROCESS KILDIN	TELEPHONE NO. 505/748-1471
TYPE OR PRINT NAME	
(This space for State Use) ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR	MAR 1 0 1995

CONDITIONS OF APPROVAL, IF ANY: