

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.  
30-015-29658

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
B-11276

7. Lease Name or Unit Agreement Name

Travis ATR 24 State Com #1

8. Well No.

#1

9. Pool name or Wildcat

Empire Morrow South

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:

OR  
WELL ☒

OAS  
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 : 1980 Feet From The South Line and 1980 Feet From The West Line

Section

24

Township

18S

Range

28E

NMPM

Eddy

County

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

3493

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: TD; Csg/Cmt job ☒

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.

TD 7 7/8" hole @ 11,260', 4:15 am 7/28/97

7/30/97 Run 261 jts 5 1/2" 17# LT&C J-55 N-80 & S-95 csg; Set @ 11,260'  
Cmt'd w/375 sks Super C Modified  
PD @ 8:30 am 7/31/97  
RR @ 2:30 pm 7/31/97

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

SIGNATURE

Vickie Teel

TITLE

Production Analyst

DATE 8/5/97

TYPE OR PRINT NAME

Vickie Teel

505/623-6601

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM

APPROVED BY

DISTRICT II SUPERVISOR

TITLE

DATE

AUG 8 1997

CONDITIONS OF APPROVAL, IF ANY: