

C/SF

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

WELL AP NO 30-015-21934

5. Indicate Type of Lease

State ☒ FEE

6. State Oil & Gas Lease No.
E-641

7. Lease Name or Unit Agreement Name

NORTH MILLMAN UNIT

8. Well No

1

9. Pool Name or Wildcat

MILLMAN STRAWN GAS

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 GAS
WELL WELL ☒ OTHER

2. Name of Operator

Yates Petroleum Corporation

3. Address of Operator

105 South 4th., Artesia, NM 88210

4. Well Location

Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 7 Township 19S Rang 28E NMPM EDDY COUNTY

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

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

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.

YATES PETROLEUM CORPORATION PROPOSES TO TEMPORARILY ABANDON AS FOLLOWS:

1. MIRU PU & safety equipment.
2. Pump 2% KCL water down tubing as needed to ND wellhead & install BOP.
3. POH w/ tubing, load hole as necessary w/ treated water & TIH to retrieve packers set @ 10,602', 10,668', & 10,868'. Run & set 4.5" CIBP's @ following depths:
10,610' & cap w/ 35' cement - over Morrow perms
9,397' & cap w/ 35' cement - over Strawn perms
5. TIH w/ tubing; load hole w/ 7% KCL water w/ 1 gpt corrosion inhibitor.
6. Pressure test casing to 500 psi & record chart for 30 minutes.
7. POH laying down tubing. ND BOP, install B1 adaptor w/ ball valve. RD - move off.

Notify OCD 24 hrs. prior to any work done

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

SIGNATURE

Donna Clack

TITLE

Operations Technician

DATE

6/3/02

TYPE OR PRINT NAME

DONNA CLACK

TELEPHONE NO.

505-748-1471

(This space for State Use)

APPROVED BY

TITLE

Field Rep

DATE

JUN 6 2002

CONDITIONS OF APPROVAL, IF ANY:

Notify O.C.D. 24
hours prior to test.
748-1283