| District IJ<br>PO Drawer DD, Artesia, NM<br>District III<br>1000 Rio Brazos Rd., Aztec, I<br>District IV<br>PO Box 2088, Santa Pe, NM 1  | NM 87410                          | State of New Mexico<br>Energy, Minerals & Natural Resources Department<br>OIL CONSERVATION DIVISION<br>PO Box 2088<br>Santa Fe, NM 87504-208 |                               |   |                                   |          |                         |                                    | Form C<br>vised February 10,<br>Instructions on<br>hit to Spropriate District O<br>State Lease - 6 Co<br>Fee Lease - 5 Co<br>AMENDED REPO |                                  |  |
|--|-----------------------------------|--|-------------------------------|---|-----------------------------------|----------|-------------------------|------------------------------------|---|----------------------------------|--|
| APPLICATION I  | FOR PERI                          | MIT T  | O DRI                         | LL, RE-EN   | TER, DEE                          | PEN      | SELVER                  | ACK.                               |   | DD A ZONE                        |  |
|  |                                   | ' <b>o</b><br>YATES<br>105 S   | perator Na<br>PETRO<br>outh F | me and Address.<br>LEUM CORPO<br>ourth Stro<br>w Mexico | ORATION<br>eet                    |          |                         |                                    | <b>۵۰'</b><br>025   | GRID Number<br>575<br>API Number |  |
| * Property Code  |                                   |  |                               | * P   | roperty Name                      | ··       |                         |                                    |   | 15-22233<br>'Well No.            |  |
| 21597  | 7                                 |  |                               | Lakewoo   | od AQE Stat                       | te       |                         |                                    |   | 1 .                              |  |
|  |                                   | -  |                               | <sup>7</sup> Surface                                    | Location                          |          |                         |                                    |   |                                  |  |
| F 30   | 195 2                             | Lange<br>26E   | Lot Idn                       | Feet from the<br>1980 '                                 | North/South in<br>North           |          | Feet from the<br>1980 ' | Wes                                | i <b>cst line</b><br>St   | County<br>Eddy                   |  |
| UL or lot no. Section  | Township R                        | ange   | Sottom                        | Feet from the   | ion If Differ                     |          | From Sur                | _                                  | /est line   | County                           |  |
| Work Type Code   | 'Proposed F<br>Canyon             |  |                               |   |                                   |          | <sup>14</sup> Propo     | red Pool 2                         |   |                                  |  |
| E  | - W                               | ' Well Type Code   |                               |   | Cable/Rotary "Lease Type (<br>R S |          |                         | ode "Ground Level Elevan<br>3436 ' |   |                                  |  |
| " Multiple   |                                   | oposed De<br>27 '  | ed Depth "Formation           |   | 1º Contractor                     |          |                         | <sup>21</sup> Spud Date            |   |                                  |  |
|  |                                   |  |                               | Car.yo  | 1                                 |          | determi                 | ned                                | A   | SAP                              |  |
| Hole Size  | Casing Si                         | 1  | Casine                        | weight/foot   | nd Cement H                       | _        |                         |                                    |   |                                  |  |
| 17 1/2"  | 13 3/8                            |  |                               | 8#  | Setting Dept<br>500 *             | ь<br>——— | Sacks of<br>600 s       | Cement                             |   | Estimated TOC                    |  |
| 12 1/4"  | 9 5/8                             | 11   | 3                             | 6#  | 1400'                             |          |                         |                                    |   | n place                          |  |
| 8 3/4"   | 7"                                |  |                               | <u>&amp;</u> 26#  | TD                                |          | 800 s<br>1500 s         |                                    |   | n place<br>rculate               |  |
| Describe the proposed pro-<br>mone. Describe the blowout pro-<br>Yates Petroleum<br>by Monsanto Com<br>out plugs to a<br>interval at 797 | Corporat<br>pany. Th<br>TD of 962 | tion p<br>nis we<br>27'.   | oropose<br>11 was             | es to re-e $P/\lambda$ in                               | enter this                        | wel      | 1 that wa               | as or:<br>are pl<br>in th          | iginal  | ly drilled<br>g to drill<br>yon  |  |
|  |                                   | <u> </u>   |                               |   |                                   |          |                         | 15                                 |   | tay                              |  |
| I hereby certify that the millor<br>my knowledge and brites<br>ignature:   |                                   | Ve is dive   | and compact                   |   | OIL (                             | CON      | ISERVAT                 | ION I                              | DIVISI  | NC                               |  |

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# ALL IN S A1231 - 200 W et/inches.

C-101 Instructions ocations will refer to the New Mexico Principal Meridian.

Measurements and dimensione are to be

IF THIS IS AN AMENDED REACHER, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

Operator's OGRID number. If you do not have one it will 1. be assigned and filled in by the District office.

2 Operator's name and address

- API number of this well. If this is a new drill the OCD will 3 assign the number and fill this in.
- Property code. If this is a new property the OCD will 4 assign the number and fill it in.
- 5 Property name that used to be called 'well name'
- 6 The number of this well on the property.
- 7 The surveyed location of this well New Mexico Principal Meridian NOTE: If the United States government survey designates a Lot Number for this location use that number In the 'UL or lot no.' box. Otherwise use the OCD Unit Latter.
- The proposed bottom hole location of this well at TD 8

9 and 10 The proposed pool(s) to which this well is beeing drilled.

- Work type code from the following table: Ν
  - New well ε

11

12

- Re-entry D
- Drill deeper Ρ Plugback
- A Add a zone
- Well type code from the following table:
  - 0 Single oil completion
  - G Single gas completion
  - М Mutiple completion T.
  - Injection wail
  - S SWD well
  - W Water supply well
  - С Carbon dioxide well
- 13 Cable or rotary drilling code
  - С Propose to cable tool drill
  - R Propose to rotary drill
- 14 Lease type code from the following table: F
  - Federal S
  - State Ρ
  - Private N
  - Navajo J
  - Jicarilla Ute
  - U
  - 1 Other Indian tribe
- 15 Ground level elevation above sea level
- 16 Intend to mutiple complete? Yes or No
- 17 Proposed total depth of this well

- 18 Geologic formation at TD
- Name of the intended drilling company if known. 19
- 20 Anticipated spud date.
  - Proposed hole size ID inches, proposed casing OD inches, casing weight in pounds per foot, setting depth of the casing or depth and top of liner, proposed cementing
- volume, and estimated top of coment Brief description of the proposed drilling program and BOP 22
  - program. Attach additional sheets if necessary.
- 23

21

The signature, printed name, and title of the person authorized to make this report. The date this report was signed and the telephone number to call for questions about this report.

District ? PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2088, Santa Fe, NM 87504-2088

### State of New Mexico Energy, Minerals & Natural Resources Department

### OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Form C-102 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

AMENDED REPORT

|                                    | API Numb | er        |                    | <sup>2</sup> Pool C | ode                      | ' Pool Name<br>Canyon       |                 |                         |                   |                         |   |  |  |
|------------------------------------|----------|-----------|--------------------|---------------------|--------------------------|-----------------------------|-----------------|-------------------------|-------------------|-------------------------|---|--|--|
| * Property                         | Code     |           |                    |                     |                          | erty Name                   |                 |                         |                   | •                       | ' Well Number                             |  |  |
| Lakewood AQE State                 |          |           |                    |                     |                          |                             | 1               |                         |                   |                         |   |  |  |
| 'OGRID No. 'Operator Name          |          |           |                    |                     |                          |                             | ' Elevation     |                         |                   |                         |   |  |  |
| 02557                              | 5        | <u></u>   |                    |                     |                          | ETROLEUM CO                 | RPOR            | ATION                   |                   |                         | 3436'                                     |  |  |
| <u></u>                            |          |           |                    |                     | <sup>10</sup> Surfa      | ce Location                 |                 |                         |                   |                         |   |  |  |
| UL or lot no.                      | Section  | Township  | Range              | Lot Idn             | Feet from th             | e North/South lin           | e F             | eet from the            | East/West         | st/West line County     |   |  |  |
| F                                  | 30       | 19S       | 26E                |                     | 1980'                    | North                       |                 | 1980'                   | West              | t                       | Eddy                                      |  |  |
|                                    |          |           | <sup>11</sup> Bot  | tom Ho              | le Location              | If Different                | From            | Surface                 |                   |                         |   |  |  |
| UL or lot no.                      | Section  | Township  | Range              | Lot Idn             | Feet from the            | e North/South lir           | e F             | eet from the            | East/West         | line                    | County                                    |  |  |
| <sup>12</sup> Dedicated Acr<br>160 |          |           | Consolidatio       |                     | Order No.                |                             |                 |                         | L                 |                         |   |  |  |
| NO ALLOV                           | WABLE V  | WILL BE A | ASSIGNE<br>NON-ST. | D TO TI<br>ANDARI   | HIS COMPLE<br>D UNIT HAS | TION UNTIL A<br>BEEN APPROV | LL INT<br>ED BY | FERESTS H<br>( THE DIVI | IAVE BEE<br>ISION | EN CO                   | NSOLIDATED                                |  |  |
| 16                                 |          |           | <                  |                     |                          |                             |                 | <sup>17</sup> OPEE      | RATOR             | CER                     | TIFICATION                                |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | I hereby cert           | ify that the inj  | formation               | contained herein is                       |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | true and com            | plete to the b    | est of my               | knowledge and belief                      |  |  |
|                                    | 5        |           | -                  |                     |                          |                             |                 |                         |                   |                         |   |  |  |
|                                    | ) )      |           | <b>^</b> \$0'      |                     |                          |                             |                 |                         |                   |                         |   |  |  |
|                                    |          |           | <u> </u>           |                     |                          |                             |                 |                         |                   |                         | $\cap$                                    |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | Signature               | $\Omega_{-}$      | $\overline{\mathbf{n}}$ | ┫-/                                       |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | 14en                    | s Dell            | when                    | N I                                       |  |  |
| <b>k</b>                           |          |           | •                  |                     |                          |                             |                 | Printed Nam<br>Ken      | e<br>Beardem      | iph1                    |   |  |  |
| <b>1</b> 9                         | 9 Do'    | U         | /                  |                     |                          |                             |                 | Title                   |                   |                         |   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | Land                    |                   |                         |   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | Date Sept               | ember 9           | , 19                    | 97  |  |  |
|                                    |          |           |                    | T                   |                          |                             |                 | <sup>18</sup> SURV      | EYOR              | CERT                    | TIFICATION                                |  |  |
|                                    |          |           |                    |                     |                          |                             |                 |                         |                   |                         | n shown on this plat                      |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | was plotted fr          | om field noie     | s of actua              | al surveys made by<br>at the same is true |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | and correct to          | the best of n     | ny belief.              | ui die sume is true                       |  |  |
|                                    |          |           |                    |                     |                          |                             |                 |                         |                   |                         |   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | Date of Surve           | •                 |                         |   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | Signature and           | Scal of Profe     | ssional S               | Surveyer:                                 |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | REFER                   | TO ORI            | GINA                    | L PLAT.                                   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 |                         |                   |                         |   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 |                         |                   |                         |   |  |  |
|                                    |          |           |                    |                     |                          |                             |                 | Certificate Nu          | mber              |                         |   |  |  |



NET MEXICO UIL CONSERVATION COMMISS CATION AND ACREAGE DEDICATIO ٨T WE

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Supersedes C-128 Effective 1-1-65

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|                                   |                                 | All distances mus  | t be from the outer bou | ndaries of the Sec | ion.   |   |
|-----------------------------------|---------------------------------|--|-------------------------|--------------------|--|---|
| perator<br>MON                    | VSANTO COMPAN                   |  | Lease                   | ewood State        | COM.   | Well No.  |
| Init Letter<br>F                  | Section<br>30                   | Township<br>19-5   | Range<br>26-            | E                  | Eddy   |   |
| ictual Footage Lo<br>1980         | feet from the                   |  | and 1980                | feet from t        | <sub>he</sub> Westly   | line<br>Dedicated Acreage:  |
| round Level Elev<br>3419          | : Producing F                   | Morrow   |                         | ldcat              |  | .320 Acres  |
| <u> </u>                          | ha acteage dedi                 | cated to the subje   | ct well by colored      | l pencil or hact   | ure marks on   | the plat below.   |
| 2. If more interest :             | than one lease<br>and royalty). | is dedicated to the  | e well, outline eac     | ch and identify    | the ownership  | thereof (both as to working   |
| dated by                          | communitization                 | different ownershi<br>, unitization, force<br>answer is "yes," t | pooling. etc?           |                    |  | of all owners been consoli-   |
| X Yes                             |                                 |  |                         |                    |  |   |
| this form<br>No allow<br>forced-p | if necessary.)_                 |  | til all interests hi    | ave been consu     | lidated (by c  | idated. (Use reverse side of<br>ommunitization, unitization,<br>een approved by the Commis-   |
| sion.                             |                                 | LEASE  |                         |                    |  | CERTIFICATION   |
|                                   | · +<br>!                        | 100%   |                         |                    | toined<br>best<br>best<br>Positio<br>Reg<br>Compar<br>Mon<br>Date<br>Jul<br>I he<br>show<br>note | ional Production Mgr.   |
| STATI                             |                                 | 320 Acres  | 2000 1509               | 1000 500           | Date Date  | Wiedge and belief.<br>July 15, 1977<br>Surveyed<br>Richard B. Duniven<br>Stered Professional Engineer<br>or Land Surveyor<br>Stack, Macan<br>Hicate No.<br>4882 |

# **YATES PETROLEUM CORPORATION**



typical choke manifold assumby for 14 rated working pressure service-surface installation

#### EXHIBIT B

# THE FOLLOWING CONSTITUES THE MINIMUM BLOWOUT PREVENTER REQUIREMENTS FOR 3000 PSI WP SYSTEMS

- 1. All preventers to be hydraulically operated with secondary manual controls installed prior to drilling out from under casing.
- 2. Choke outlet to be a minimum of 3" diameter.
- 3. Kill line to be of all steel construction of 3" minimum diameter.
- 4. All connections from operating manifolds to preventers to be all steel. Hole or tube to be a minimum of one inch in diameter.
- 5. The available closing pressure shall be at least 15% in excess of that required with sufficient volume to operate the B.O.P.'s.
- 6. All connections to and from preventer to have a pressure rating equivalent to that of the B.O.P.'s.
- 7. Inside blowout preventer to be available on rig floor.
- Operating controls to be located a safe distance from the rig floor.
- 9. Hole must be kept filled on trips below intermediate casing.