

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

+458

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.  
30-015-24096

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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

RECEIVED

2. Name of Operator  
YATES PETROLEUM CORPORATION

AUG 01 '89

3. Address of Operator  
105 South 4th St., Artesia, NM 88210

O. C. D.

7. Lease Name or Unit Agreement Name

Emma QE Com

8. Well No.  
2

9. Pool name or Wildcat

Pinnacle Dr. Perforate

4. Well Location  
Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line

ARTESIA, OFFICE

Section 21 Township 19S Range 24E NMPM Eddy County

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

3712' 6"

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: Workover - perforate existing zone ☐

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.

Well is presently a marginal producer from perms 6270-6335', 6560-75', 6813-25', 6864-67' and 6922-40'. Propose to perforate and acidize Canyon at 7538-40', 7479-82' and Wolfcamp at 5872-76'. New gas to supplement existing production.

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

SIGNATURE Juanita Goodlett TITLE Production Supervisor DATE 7-28-89  
TYPE OR PRINT NAME Juanita Goodlett TELEPHONE NO. 505/748-1471

(This space for State Use)

APPROVED BY [Signature] TITLE OIL AND GAS INSPECTOR DATE 8-8-89

CONDITIONS OF APPROVAL, IF ANY: