

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.

30-015-26062

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
VB-298

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

2. Name of Operator

YATES PETROLEUM CORPORATION

3. Address of Operator

105 South 4th St., Artesia, NM 88210

4. Well Location

Unit Letter 0 : 660 Feet From The 1 South Line and 2310 Feet From The East Line

Section 20 Township 19S Range 23E NMPM Eddy County

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

4046.4' GR

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: Perforate, Treat, Test ☒

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.

10-26-89. RU Reverse Unit. WIH, tagged up at 4585' on cement. Tagged retainer at 4590'. Drilled to 4640'. Displace hole w/1% KCL. RD. Perforated 4590-4632' w/14 .41" holes as follows: 4590, 91, 97½, 4602, 08, 09, 10, 14, 20, 28, 29, 30, 31 and 4632'. Treated perfs 4590-4632' w/3500 gals 20% NEFE acid and 12 ball sealers. Swabbed dry. Gas TSTM.
11-1-89. Perforated 3844-4296' w/29 .41" holes as follows: 3844, 3887, 89, 92½, 3908, 10, 15, 53, 59, 62, 4006, 09, 85, 90, 93, 4101½, 08, 12, 22½, 82, 88, 93, 4214, 18, 25, 86, 90, 94 and 4296'. Treated perforations in two stages w/4000 gals 20% NEFE acid. Swabbed well dry. Gas TSTM.

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

SIGNATURE

TITLE Production Supervisor

DATE 11-6-89

TYPE OR PRINT NAME

Juanita Goodlett

TELEPHONE NO. 505/748-1471

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

TITLE

DATE

NOV 14 1989

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: