Submit 3 Copies to Appropriate District Office

State of New Mexico Energ Ainerals and Natural Resources Department

| Form C-103 Revised 1-1-89 | |
|------------------------------|--|
|------------------------------|--|

| DISTRICT I P.O. Box 1980, Hobbs, NM 88240 | on | CONSERVA | | | WELL API NO. | | |
|---|---------------------------|---|-----------------|--------------------------------|---|-----------------------------|-------------------|
| | • | P.O. Bo | | | 30-015-26226 | · | |
| DISTRICT II P.O. Drawer DD, Artesia, NM 882 | 210 | Santa Fe, New Me | | | 5. Indicate Type of Le | STATE | FEE X |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM | 87410 | |) [| JL 0 8 1991 O. C. D. | 6. State Oil & Gas Le | ase No. | |
| SUNDRY NOTICES AND REPORTS ON WELDERS OF COMMENTS | | | | | | | |
| (DO NOT USE THIS FORM F | OR PROPOSAL RESERVOIR. | S TO DRILL OR TO D USE "APPLICATION F OR SUCH PROPOSALS | EEPEN OR PEF | OŘÍPLÚG BACK TO A | 7. Lease Name or Uni | t Agreement Name | |
| 1. Type of Well: OH. GAS WELL X WELL OTHER Workover | | | | | Clifford ADD | | |
| 2. Name of Operator YATES PETROLEUM CO | ORPORATION | ī | | | 8. Weil No. 1 | | |
| 3. Address of Operator | | | | | 9. Pool name or Wildcat North Dagger Draw Upper Penn | | |
| 105 South 4th St. | , Artesia, | NM 88210 | | | North Dagger | Draw Opper | |
| 4. Well Location Unit Letter P : | 660_ Fα | st From TheSou | th | Line and660 |) Feet From Th | e East | Line |
| Section 35 | To | wnship 19S | Ra | | NMPM | Eddy | County |
| | | 10. Elevation (Show 3631' | | ĎF, RKB, RT, GR, esc.) | | | |
| | | | icate l | Nature of Notice, R | eport, or Other D SEQUENT REF | ata | |
| | MOTIOE OF INTENTION TO: | | | | | | |
| PERFORM REMEDIAL WORK | | LUG AND ABANDON | | REMEDIAL WORK | | TERING CASING | ANA JENIT |
| TEMPORARILY ABANDON | c | HANGE PLANS | | COMMENCE DRILLING | | UG AND ABANDO | MMEN : |
| PULL OR ALTER CASING CASING TEST AND COTHER: OTHER: Acidize | | | | | | X | |
| OTHER: | | | . 🔲 | OTHER: | | | |
| 12. Describe Proposed or Complete work) SEE RULE 1103. 6-25-91. Acidiz NEFE acid and 30 | ed existi | ng perforation | ns 766 | 60-7824' triple | entry with 25 | 5000 gals 20 | 0% cion. |
| I hereby certify that the information a SIGNATURE CERTIFICATION TYPE OR PRINT NAME J | bove is true and con | dus | viedge and | belief. Production S | upervisor | DATE 7-5-9 TELEPHONE NO. 50 | 91 05/748-1471 |
| | RIGINAL SI | GNED BY | | | | | . 4004 |
| • | ALLE MILLIA | MS | | | | JUL 1 | 2 1991 |
| APPROVED BY | SUPERVISOR | , DISTRICT IT | π | u | | - DAIE | |

CONDITIONS OF AFFROVAL, IF ANY: