State of New Mexico Submit 3 Copies Form C-103 to Appropriate District Office Minerals and Natural Resources Department Revised 1-1-89 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-015-26562 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE XX 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: METT | WELL SWD Roy AET 2. Name of Operator 8. Well No. YATES PETROLEUM CORPORATION 3. Address of Operator 9. Pool name or Wildcat 105 South 4th St., Artesia, NM SWD: Ellenburger 4. Well Location 810 South 660 Unit Letter Feet From The East Line and Feet From The Line Section 19S 25E Township Range **NMPM** Eddy County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3556' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: Acidize existing injection perfs X 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. Propose to acidize existing injection perforations 9766-11110' (Devonian-Ellenburger) perforations with 50000 gallons gelled 20% NEFE HCL acid with rock salt block. Return well to disposal. RECEIVEN MAR 2 9 1995 OIL CONDIN. DIST. 2 I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE March 28, 1995 Production Clerk SIGNATURE Z Rusty Klein TELEPHONE NO. 505/748-1471TYPE OR PRINT NAM ORIGINAL SIGNED BY TIME W. GD.: (This space for State Use) District is auxensizor MAR 3 1 1995 TITLE . APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY: