

District I -
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-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address. Yates Petroleum Corporation 105 South Fourth Street Artesia, NM 88210		² OGRID Number 25575
		³ API Number 30 - 015-10414
⁴ Property Code	⁵ Property Name Archimedes ARE State Com	⁶ Well No. 1

⁷ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	18	21S	24E		1650	South	1980	East	Eddy

⁸ Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
⁹ Proposed Pool 1 Dagger Draw Upper Penn, South					¹⁰ Proposed Pool 2				

¹¹ Work Type Code P	¹² Well Type Code O/G	¹³ Cable/Rotary Pulling Unit	¹⁴ Lease Type Code S	¹⁵ Ground Level Elevation 3838' KB
¹⁶ Multiple N	¹⁷ Proposed Depth PBSD 9469'	¹⁸ Formation Canyon	¹⁹ Contractor Unknown	²⁰ Spud Date ASAP

²¹ Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17-1/2"	13-3/8"	48#	375'	In place	
12-1/4"	9-5/8"	36# & 40#	3205'	In place	
8-3/4"	7"	23# & 26#	9734'	In place - Tied back to	
				existing 7" at 5493'	

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

Propose to temporarily abandon perforations 9521-9599' (Morrow) and recompleate to Canyon as follows:

1. Set standing valve in Uni VI packer at 9469'. Load tubing.
2. Nipple down tree and nipple up BOP. TOOH with tubing.
3. Perforate 8032-8069' (Canyon). Stimulate as necessary for production.
4. Swab test.
5. Place well into production.

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Title:

Date:

Phone:

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Conditions of Approval:

Attached ☐

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Expiration Date:

AUG 22 1997

August 22, 1997

505-748-1471

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Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-10414		Pool Code 15475	Pool Name Dagger Draw Upper Penn, South
Property Code	Property Name Archimedes ARE State Com		Well Number 1
OGRID No. 025575	Operator Name Yates Petroleum Corporation		Elevation 3838' KB

¹⁰ Surface Location

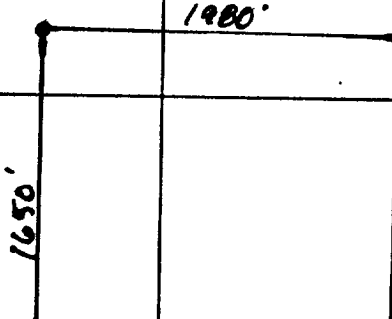
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	18	21S	24E		1650	South	1980	East	Eddy

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres 320	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16						17 OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i> Signature: <u>Rusty Klein</u> Printed Name: <u>Rusty Klein</u> Title: <u>Operations Technician</u> Date: <u>August 22, 1997</u>
						18 SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i> REFER TO ORIGINAL PLAT Date of Survey: _____ Signature and Seal of Professional Surveyer: _____
						Certificate Number: _____