

DUAL OR MULTIPLE COMPLETION DATA SHEET

Cosquina Oil Corp. Yates State #1-K-10-21-27
Operator 9-5-73 Well S.T.R.

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Order No. MC 2060 Pools Benton flat narrow thg
Shawn thg

PACKER LEAKAGE TEST DATA

| Test Date | Approval Date | Test Date | Approval Date |
|-------------|---------------|-----------|---------------|
| 7-28-8-2-73 | | | |
| 1-9-10-74 | 1-17-74 | | |
| 11-13-16-75 | 12-2-75 B | | |
| 6-27-7-2-76 | 7-15-76 | | |
| 1/20-24/78 | 1/25/78 | | |
| 11/15/19/78 | 12/8/78 | | |
| 6/5/9/79 | 6/27/79 | | |
| | | | |
| | | | |
| | | | |
| | | | |

Submit 3 Copies To Appropriate District
Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Alamogordo, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

WELL API NO.

30-015-20838

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

K-3977

7. Lease Name or Unit Agreement Name:

YATES STATE

8. Well No.

1

9. Pool name or Wildcat

BURTON FLAT MORROW

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

CHI OPERATING, INC.

3. Address of Operator

P.O. BOX 1799 MIDLAND, TEXAS 79702

4. Well Location

Unit Letter K : 1980 feet from the SOUTH line and 1980 feet from the WEST line

Section 10

Township 21S

Range 27E

NMPM EDDY

County

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

3275' KB

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Release packer @ 11,195'. TOH with tubing & packer. Set CIBP above Morrow perforations, thus temporarily abandoning the wellbore.

W/35' cent set CIBP @ 10200'

Schedule test 24 hours in advance with
OCD. 505-748-1283. Test to 500# for thirty
minutes. A pressure drop of not greater than
10% will be allowed.

OCD must witness test.

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

SIGNATURE

TITLE

DATE

Type or print name

(This space for State use)

Telephone No.

APPROVED BY

TITLE

DATE

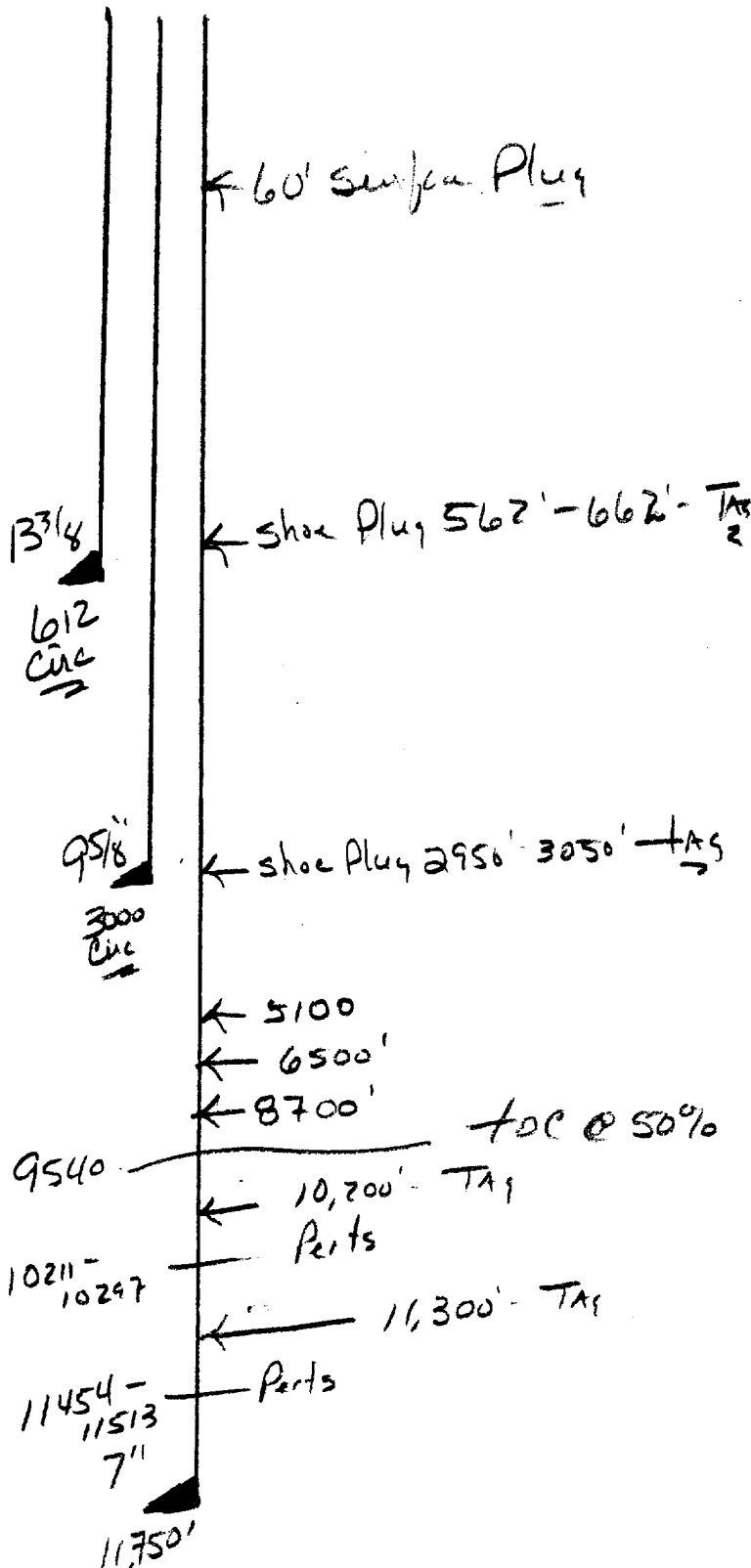
Conditions of approval, if any:

FEB 21 2002

Operator Chi Operating Inc
 Well Yates State #1
 Unit K Section 10 Township 21 Range 27
 API # 30-015-20838

TOPS

T. Salt _____
 B. Salt _____
 Yates _____
 Glorieta _____
 Delaware 2900
 Bone Sp. 5165
 Abo _____
 Wolfcamp 8759
 Morrow 10920
 Devonian _____
 Fusselman _____
 Other _____



- Contact OCD 24 hrs. prior to any work done.
- Salt gel mud consisting of 10# brine with 25# of gel per barrel must be placed between each plug
- Install dry hole marker as per rule 202.B.2
- Plugs are to be set from point indicated up.
- Plugs must not be less than 100' or 25 Sacks of cement, whichever is greater, unless specifically indicated.
- Shoe and stub plugs will be 50' above and below shoe or stub and tagged.
- Surface plug will be from 0' - 60'
- Where plugs are required cement must be placed inside and outside of all casing string(s), in the correct footage or sacks required, if no cement exists.
- Plugs to be tagged will be indicated.