

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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Form C-103  
Revised 10-1-7

JUN 09 1983

O. C. D.  
ARTESIA, OFFICE

3a. Indicate Type of Lease  
State ☒ Fee ☐  
State Oil & Gas Lease No.  
K-6854

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Yates Petroleum Corporation ✓	8. Farm or Lease Name Stonewall WM State
3. Address of Operator 207 South 4th St., Artesia, NM 88210	9. Well No. 1
4. Location of Well UNIT LETTER <u>0</u> , <u>560</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>30</u> TOWNSHIP <u>20S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Und. Delaware
15. Elevation (Show whether DF, RT, GR, etc.) 3258' GR	12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER Frac treat well ☒  
ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

17. 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.

TD 4953'. Frac'd well w/40000 gallons 75 Quality Methanol foam, 52000# (36000# 20/40 and 16000# 10/20) sand. Set pumping equipment. Pumping back load and testing well.

AMENDED REPORT (to correct volume of 10/20 sand used in frac)

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

SIGNED Leslie A. Clements

TITLE Production Supervisor

DATE 6-8-83

APPROVED BY \_\_\_\_\_

Original Signed By  
Leslie A. Clements  
TITLE Supervisor District II

DATE JUN 14 1983

CONDITIONS OF APPROVAL, IF ANY: