|  |  |                              | C15                       | 4                  |          |  |  |
|--|--|------------------------------|---------------------------|--------------------|----------|--|--|
| Submit 3 Copies To Appropriate District  | State of New Me                        |                              | 🖌 🛛 Form C-               |                    |          |  |  |
| Office<br>District I   | Energy, Minerals and Natural Resources |                              |                           | Revised March 25,  | 1999     |  |  |
| 1625 N. French Dr., Hobbs, NM 88240  |  |                              | WELL API NO.              | 1                  |          |  |  |
| District II  | OIL CONSERVATION DIVISION              |                              | 30-015-31911              |                    |          |  |  |
| 811 South First, Artesia, NM 88210<br>District III   | 1220 South St. Francis Dr.             |                              | 5. Indicate Type of Lease |                    |          |  |  |
| 1000 Río Brazos Rd., Aztec, NM 87410   | Santa Fe, NM 87505                     |                              |                           | X FEE              |          |  |  |
| District IV<br>1220 S. St. Francis Dr., Santa Fe, NM   | Santa PC, THE S                        | 6. State Oil & Gas Lease No. |                           |                    |          |  |  |
| 87505  |  |                              | V-2705                    |                    |          |  |  |
| SUNDRY NOTICE  | 7. Lease Name or                       | Unit Agreement Na            | ime:                      |                    |          |  |  |
| (DO NOT USE THIS FORM FOR PROPOSAL<br>DIFFERENT RESERVOIR. USE "APPLICA"   |  | C11 _                        |                           |                    |          |  |  |
| PROPOSALS.)  | Graham AKB                             | State                        |                           |                    |          |  |  |
| 1. Type of Well:   |  |                              |                           |                    |          |  |  |
| Oil Well X Gas Well  | Other                                  |                              | 7. Well No.               |                    |          |  |  |
| 2. Name of Operator  | 11                                     | Sent Sonn (S)                |                           |                    |          |  |  |
| Yates Petroleum Corporation / 5  |  |                              |                           |                    |          |  |  |
| 5. Address of Operator   |  |                              | Undes. Lost Tank Delaware |                    |          |  |  |
| 105 S. 4th Street Artesia, NM 88210 UCD AND COL Undes. Lost Tank Delaw   |  |                              |                           |                    | <b>C</b> |  |  |
| 4. Well Location   |  |                              |                           |                    |          |  |  |
|  |  |                              |                           |                    |          |  |  |
| Unit Letter <u>C</u> : <u>330</u> feet from the <u>North</u> line and <u>2310</u> feet from the <u>West</u> line |  |                              |                           |                    |          |  |  |
|  |  |                              |                           |                    |          |  |  |
| Section 2 To   | wnship <b>22S</b> Range                | 31E NMPN                     |                           | County             |          |  |  |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.)   |  |                              |                           |                    |          |  |  |
|  | 3514                                   |                              |                           | Data               |          |  |  |
|  | propriate Box to Indicate N            | ature of Notice, J           | Report or Other           |                    |          |  |  |
| NOTICE OF INTENTION TO: SUB  |  |                              | SEQUENT RE                |                    |          |  |  |
|  | PLUG AND ABANDON                       | REMEDIAL WORK                | < 🗌                       | ALTERING<br>CASING |          |  |  |
|  |  |                              |                           | PLUG AND           |          |  |  |
|  | CHANGE PLANS                           | COMMENCE DRIL                |                           | ABANDONMENT        |          |  |  |
|  | MULTIPLE                               | CASING TEST AN               | ID                        |                    |          |  |  |
|  |  | CEMENT JOB                   |                           |                    |          |  |  |
|  |  |                              | lists Casing              |                    | X        |  |  |
| OTHER:   |  | OTHER: Intermed              | late Casing               |                    |          |  |  |

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.

5/16/02 – TD 17-1/2" hole at 11:45 AM. Ran 19 joints of 13-3/8" 48# H-40 casing, set at 850'. Texas pattern guide shoe set at 850'. Insert float set at 804.96'. Cemented with 500 sx BJ Lite C Poz with 2% CaCl2. Tailed in with 200 sx Class C + 2% CaCl2. PD at 5:15 PM 5/16/02. Circulated 106 sx cement. WOC 25 hours. Reduced hole to 11" and resumed drilling.

| I hereby certify that the information above is true and complete to the best of my knowledge ar | d belief.          |              |
|---|--------------------|--------------|
| SIGNATURE fine Huerta TITLE Regulatory Compliance Superv  | <u>/isor_</u> DATE | May 29, 2002 |
| Type or print name Ting Huerta  |                    | 505-748-1471 |
| APPPROVED BY TIM W. GUM   |                    | JUN 0 3 2022 |
| Conditions of approval. if any:   |                    |              |