

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., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 005-63752
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA 2401
7. Lease Name or Unit Agreement Name Louise Yates State
8. Well Number 5
9. OGRID Number 26307
10. Pool name or Wildcat Wolf Lake

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.)

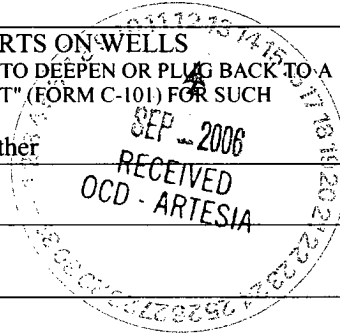
1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator
Jalapeno Corporation

3. Address of Operator
P.O. Box 1608, Albuquerque, NM 87103

4. Well Location
Unit Letter C : 380 feet from the North line and 1650 feet from the West line
Section 7 Township 9-S Range 28E NMPM County Chaves

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



Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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 recompletion.

PBTD of the well is 2372. We propose to:

1. Set a 25 sack plug from TD to 2293 covering the perforations, plus 50'. -TAC
2. We estimate that the top of the cement is at surface pipe.
3. Set a plug at top of San Andres covering 1615 to 1665.
4. Set a plug at base of surface casing which is 465 ft (40 sacks). TAC
5. Set a plug from 25ft to surface. WOC tag 24 hrs 60'
6. Set dry hole marker.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE by Harvey Yates, Jr. TITLE President DATE 9/11/06
Type or print name: Harvey Yates, Jr. E-mail address: personnel3@msn.com Telephone No. 505-242-2050
For State Use Only

APPROVED BY: [Signature] TITLE [Signature] DATE 9/27/06
Conditions of Approval (if any):

**Notify OCD 24 hrs. prior
To any work done.**