| mit 3 Copies To Appropriate District   | State of   | Now Mexico              |  | Form C-103                        |  |
|--|--|-------------------------|--|-----------------------------------|--|
| ce   | State of New Mexico Energy, Minerals and Natural Resources |                         | May 27, 2004                           |                                   |  |
| Act I<br>Co25 N. Dr., Hobbs, NM 88240  | Energy, witherars  | and Natural Resources   | WELL API NO.                           |                                   |  |
| Distri<br>1301 Grand Ave., Artesia, NM 88210   | OIL CONSERVATION DIVISION                                  |                         | 30-015-34960                           |                                   |  |
| District   | 1220 South St. Francis Dr.                                 |                         | 5. Indicate Type of Lease              |                                   |  |
| 1000 Rio Brazo d., Aztec, NM 87410<br>Distri   | Santa Fe, NM 87505   |                         | STATE FEE 6. State Oil & Gas Lease No. |                                   |  |
| 1220 S. St. 7 rancis Dr., Santa Fe, NM<br>87505  |  |                         | o. Saic on a sas E                     | Cuse Ivo.                         |  |
| SUNDRY NOT   | ICES AND REPORTS ON  | VX(F)1362720            | 7. Lease Name or U                     | nit Agreement Name                |  |
| SUNDRY NOTICES AND REPORTS ON WEIT262726 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEFEND OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH |  |                         |  |                                   |  |
| PROPOSALS.)  |  |                         |  | Swisher BJE State  8. Well Number |  |
| 1. Type of Well: Oil Well Gas Well Other O   |  |                         | 8. Well Number                         |                                   |  |
| 2. Name of Operator  |  | W See 3                 | 9. OGRID Number                        | 1                                 |  |
| Yates Petroleum Corporat   | ion \square  |                         | 02:                                    | 5575                              |  |
| 3. Address of Operator   | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\                    | 30 8                    | 10. Pool name or Wi                    |                                   |  |
| 105 S. 4th Street, Artesia,  | NM 88210   | Sy. 69V                 | Wildcat                                | Wolfcamp                          |  |
| 4. Well Location   |  | 18131101                |  |                                   |  |
| Unit Letter M:   | feet from the  | South line and          | 660 feet from the                      |                                   |  |
| Section 34   |  | 4S Range 27E            | NMPM Eddy                              | County                            |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3292'GR   |  |                         |  |                                   |  |
| 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   |  |                         | Construction Material                  |                                   |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |  |                         |  |                                   |  |
| 12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data   |  |                         |  |                                   |  |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |  |                         |  |                                   |  |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING   |  |                         |  |                                   |  |
| TEMPORARILY ABANDON  |  |                         |  | UG AND ABANDON 🗌                  |  |
| PULL OR ALTER CASING   | MULTIPLE COMPL   | CASING/CEMEI            | NT JOB                                 |                                   |  |
| OTHER:   |  | OTHER: 5' new           | hole                                   | ⊠                                 |  |
| 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.   |  |                         |  |                                   |  |
| 11/14/06 - TD 45', Made 5' new hole at 10:15 AM. Hole size 18".  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
|  |  |                         |  |                                   |  |
| 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 .  |  |                         |  |                                   |  |
| granument 1  | THE THE T  | D 1. C P                |  | 37 1 46 0006                      |  |
| SIGNATURE (  | TITLE  | Regulatory Compliance S | Supervisor DATE                        | November 16, 2006                 |  |
| Type or print name Tina Huer   | rta E-mail   | address:tinah@ypcnm.    | com Telenhone l                        | No. <u>505-748-1471</u>           |  |
| ·· · · —   | -  |                         | relephone                              | 110. <u>J0J5/40*14/1</u>          |  |
| Tor State Ose Only   | RECORDS ONLY   |                         |  | NOV a -                           |  |
| APPROVED BY:   |  | TITLE                   | D.                                     | ATE NOV 2 0 2006                  |  |
| Conditions of Approval (if any):   |  |                         |  |                                   |  |