

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JAN 22 '91

WELL API NO.
30-015-25905

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Roy AET

8. Well No.

1

9. Pool name or Wildcat

North Dagger Draw Upper Penn

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK OR USE
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER Workover

2. Name of Operator
YATES PETROLEUM CORPORATION (505) 748-1471

3. Address of Operator
105 South 4th St., Artesia, New Mexico 88210

4. Well Location
Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line

Section 8 Township 19S Range 25E NMPM Eddy County

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

3559' GR

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 ☐

OTHER: Propose to add perforations, treat ☒

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.

Well producing from perforations 7781-86' and 7801-46'.
Propose to add perforations as follows: 7758-7830' (2 SPF-146 holes).
Treat perforations with 13000 gals 20% HCL (NEFE + scale inhibitor).
Swab back load, test and run sub-pump.

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

SIGNATURE Juanita Goodlett TITLE Production Supervisor DATE 1-16-91

TYPE OR PRINT NAME Juanita Goodlett

TELEPHONE NO. 505/748-1471

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY

SUPERVISOR, DISTRICT II

TITLE

DATE

JAN 28 1991

CONDITIONS OF APPROVAL, IF ANY: