Submit 3 Copies To Appropriate District Office	State of New Mexico Form C-		Form C-103	
District I	Energy, Minerals and	l Natural Resources	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-005-63686	
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease  STATE ☐ FEE ☒	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, N	IM 87505	6. State Oil & Gas Lease	
1220 S. St. Francis Dr., Santa Fe, NM	ŕ		or state on the Gas Boase	
87505	7 7 7 77 77 77 77			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Eubanks BEN Com	
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other			8. Well Number	
1. Type of Well: Oil Well Gas Well Other			1	
2. Name of Operator		HEUEIVEU -	9. OGRID Number	****
Yates Petroleum Corporation MAY 1 2 2005			025575	
3. Address of Operator		OCD-AHTESIA	10. Pool name or Wildcat	
105 S. 4 <sup>th</sup> Street, Artesia,	NM 88210	AAR-WIESIN	Undesignated Pre	cambrian
4. Well Location				
Unit Letter O:	1200 feet from the	South line and	feet from the	East line
Section 22	Township 9S	Range 24E	NMPM Chaves C	County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3577'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 Below-Grade Tank: Volume bbls; Construction Material				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
12. Chook repropriate 20th to indicate transfer of the control of the 20th				
	NTENTION TO:	SUB	SEQUENT REPORT	OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON	CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ PLUG AND ABANDON ☐			
PULL OR ALTER CASING	☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐			
OTHER.	_	THER. Could be		57
OTHER:	pleted operations (Clearly etc.		urface and intermediate casi	
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.				
4/28/05 – Spudded 26" conductor hole at 1:00 PM. Set 40' of 20" conductor and redi-mix to surface.				
4/30/05 – Resumed drilling at 11:00 PM.				
5/1/05 – Lost circulation at 410'. Worked out of hole to 400' – freed up. TIH to 400'-449' stuck. Work stuck drill string free. Worked				
out of hole to 338' - freed up. Picked up to 406'. Pumped 200 sx RFC with 5 pps D24 + .24#/sx 29 (yld 1.6, wt 14.2) and 100 sx "C"				
with 2% CaCl2 (yld 1.32, wt 14.8). WOC.				
5/2/05 – Washed and reamed with 17-1/2" bit to 876'.				
5/3/05 - Set 13-3/8" 48# H-40 ST&C 8rd casing at 876'. Cemented with 200 sx RFC (yld 1.6, wt 14.2) and 800 sx 35:65 Poz "C" (yld				
2.1, wt 12.1). Tailed in with 200 sx "C" with 2% CaCl2 (yld 1.32, wt 14.8). Cement did not circulate. TOC 175' TS. Tested casing to				
600 psi for 30 min. WOC 18 hrs. Ran 1" cement to surface with 150 sx "C" with 3% CaCl2. WOC 18 hrs. Reduced hole and resumed				
drilling.	assing at 1621? Computed n	rith 200 or DEC + 6#/or D	21 ± 25#/av D24 (v/d 1 6 v	r# 14 2) and 600 av
5/6/05 – Set 8-5/8" 24# J-55 ST&C				
35:65 Poz "C" + 6% D20 + 5% D44 + 3% SL + 0.2% D46 + 0.25#/sx D28 + 5#/sx D24 (yld 2.1, wt 12.6). Tailed in with 200 sx "C" + 2% SI (yld 1.32, wt 14.8). Cement did not circulate. TOC 1050' TS. Ran 1" cement to surface with 290 sx "C" with 4% CaCl2. Tested				
casing to 1000 psi for 30 min. WOC 26 hrs. Reduced hole to 7-7/8" and resumed drilling.				
cusing to 1000 por for 50 mm.	20 ms. Reduced note to 7	and resumed diffing.		
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I hereby certify that the information				
grade tank has been/will be constructed or closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative OCD-approved plan [].				
SIGNATURE June	furta TITLE	Regulatory Compliance Su	pervisor DATE Ma	y 10, 2005
			-	
Type or print name Tina Huer	rta E-mail add	dress: <u>tinah@ypcnm.co</u>	om Telephone No.	505-748-1471
For State Use Only APPROVED BY:	FOR RECORDS ONL	Y Le	<b>MA</b> DATE	Y 1 5 2005

Conditions of Approval (if any):