

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

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

Form C-103
May 27, 2004

| | | |
|--|--|---|
| 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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | WELL API NO. 30-015-21472 |
| 2. Name of Operator Yates Petroleum Corporation | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 3. Address of Operator 105 S. 4 th Street, Artesia, NM 88210 | | 6. State Oil & Gas Lease No. K-4942 |
| 4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>North</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>36</u> Township <u>17S</u> Range <u>25E</u> NMPM <u>Eddy</u> County | | 7. Lease Name or Unit Agreement Name Arco EC State |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3467'GR | | 8. Well Number 1 |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> | | 9. OGRID Number 025575 |
| Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ | | 10. Pool name or Wildcat Eagle Creek; Permo Penn |
| 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐

OTHER: Acidize ☒

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.

5/5/08 – Set 5-1/2" AS-1 packer with 1.87" on/off tool and 2-3/8" tubing at 6471'.
5/7/08 – Acidize with 3000g 7-1/2% MSA acid with 1000 CF per bbl of nitrogen.

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 Tina Huerta TITLE Regulatory Compliance Supervisor DATE May 20, 2008

Type or print name Tina Huerta E-mail address: tinah@ypcnm.com Telephone No. 575-748-1471

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):