## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

| DISTRICTI      |        |    |       |
|----------------|--------|----|-------|
| P.O. Box 1980. | Hobbs. | NM | 88240 |

CONDITIONS OF APPROVAL, IF ANY:

## OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe. New Mexico

| WELL API NO.<br>30-005-62751    |     |
|---------------------------------|-----|
| 5. Indicate Type of Lease STATE | FEE |
| 6. State Oil & Gas Lease No.    |     |

DATE -

| DISTRICT II P.O. Drawer DD, Artesia, NM 88210  | CT II Santa Fe, New MEXICO apper value Santa Fe, New MEXICO apper |   | 5. Indicate Type of Lease STATE X FEE   |  |
|--|---|---|---|--|
| DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410  | II DEC 2 9 1992   |   | 6. State Oil & Gas Lease No.<br>LG 5246 |  |
| SUNDRY NOTICES AND REPORTS ON WELLE CONTROL OF THE BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)   |   | 7. Lease Name or Unit Agreement Name          |   |  |
| Type of Well:  |   | Pathfinder AFT State                          |   |  |
| WELL XX WELL OTHER RECOMPLETION  2. Name of Operator  YATES PETROLEUM CORPORATION  |   | 8. Well No. 6                                 |   |  |
| 3. Address of Operator 105 South 4th St., Artesia, NM 88210  |   | 9. Pool name or Wildcat Undesignated Wolfcamp |   |  |
| 4. Well Location  Unit Letter F : 1980 Feet From The North   | Line and1980  |   |   |  |
|  | Range 27E heiher DF, RKB, RT, GR, etc.) . 5   | NMPM Cha                                      | ves County                              |  |
| 11. Check Appropriate Box to India NOTICE OF INTENTION TO:   | cate Nature of Notice, R  | leport, or Other Data<br>SEQUENT REPO         | RT OF:                                  |  |
| PERFORM REMEDIAL WORK PLUG AND ABANDON   | REMEDIAL WORK   |   |   |  |
| TEMPORARILY ABANDON CHANGE PLANS   | COMMENCE DRILLIN  |   | S AND ABANDONMENT                       |  |
| PULL OR ALTER CASING   | CASING TEST AND C   | EMENT JOB                                     |   |  |
| OTHER: Plugback, test Wolfcamp   | X OTHER:  | the second data of access                     | and proposed                            |  |
| 12. Describe Proposed or Completed Operations (Clearly state all pertinent de work) SEE RULE 1103.   |   |   |   |  |
| 12-28-92. Received verbal approval from as follows:  1) POOH w/sub pump and tubing.  2) Set CIBP at 6300' and dump 35' cemer 3) Perforate Wolfcamp 5573-84' w/1 SPF 4) TIH w/packer, set at ± 5650' and propull up above perfs, set at ± 5530' and 20% NEFE acid with 18 ball sealers.  5) Swab and test.  File recompletion if Wolfcamp is commerced.   | nt on top.<br>(12 holes).<br>ressure test bottom<br>swab test. If war   | of hole to 2000                               | ) psi. If OK,                           |  |
| I hereby certify that the information above is true and complete to the best of my know  | bedge and belief.  TITLE Production   | Supervisor                                    | 12-28-92                                |  |
| SIGNATURE (LINIA) STATEMENT STATEMEN | TILE  |   | тецерноне но. 505/748—1471              |  |
| (This space for State Use)   | 1, 1 ~  | 4   | 1-4-93                                  |  |