Submit 3 Copies to Appropriate District Office

## State of New Mexico Ener 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 OIL CONSERVATION DIVISION P.O. Box 2088

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 30-005-63150

5. Indicate Type of Lease
STATE
FEE X

WELL API NO.

| DISTRICT III<br>1000 Rio Brazos Rd., Aziec, NM 87410   | A                                | 6. State Oil & Gas Lesse No.                 |
|--|----------------------------------|--|
| SUNDRY NOTICES AND REPORTS ON WE<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPE<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PI<br>(FORM C-101) FOR SUCH PROPOSALS.)  | N OR PLUG BACK TO A 📑            | 7. Lease Name or Unit Agreement Name         |
| 1. Type of Well: OL GAB X WELL / WELL X OTHER  |                                  | Jamie Com                                    |
| 2. Name of Operator  |                                  | 8. Well No.                                  |
| YATES PETROLEUM CORPORATION  |                                  | 2  |
| 3. Address of Operator   |                                  | 9. Pool same or Wildcat                      |
| 105 South 4th St., Artesia, NM 88210   |                                  | Pecos Slope Abo                              |
| 4. Well Location  Unit Letter I : 1980 Feet From The South   | Line and 330                     | D Feet From The East Line                    |
| Section 33 Township 5S I   | tange 25E i                      | NMPM Chaves County                           |
| //////////////////////////////////////   |                                  |  |
| 11. Check Appropriate Box to Indicate  | Nature of Notice, Re             | eport, or Other Data                         |
| NOTICE OF INTENTION TO:  | SUBSEQUENT REPORT OF:            |  |
| PERFORM REMEDIAL WORK PLUG AND ABANDON   | REMEDIAL WORK                    | ALTERING CASING                              |
| EMPORARILY ABANDON CHANGE PLANS  | COMMENCE DRILLING                | OPNS. PLUG AND ABANDONMENT                   |
| PULL OR ALTER CASING   | CASING TEST AND CE               | MENT JOB                                     |
| OTHER:   | OTHER: Resume di                 | rilling, surface casing & cmt X              |
| 12. Describe Proposed or Completed Operations (Clearly state all persinent details, work) SEE RULE 1103.   | and give pertinent dates, includ | ting estimated date of starting any proposed |
| Resumed drilling a 14-3/4" hole with rotany  | tools at 8:00 AM                 | M 12-7-99. NOTE: Notified                    |
| Alberto Hernandez w/OCD-Artesia of resume d  | rilling.                         |  |
| TD 900'. Reached TD at 4:00 AM 12-9-99. Ra   | an 20 joints of 1                | 11-3/4" 42# H-40 (893.40') of                |
| casing set at 900'. 1-Texas Pattern notched  | d guide shoe set                 | at 893'. Insert float set at                 |
| 848'. Cemented with 265 sacks Premium Plus   |                                  |  |
| flocele (yield 2.02, weight 12.4). Tailed  |                                  |  |
| (yield 1.34, weight 14.8). PD 3:00 PM 12-9-  |                                  |  |
| 97 sacks. WOC. Cut off and welded on flow WOC 19 hours and 30 minutes. Reduced hole  |                                  |  |
| HOO 17 HOURS and 30 milliones. Reduced Hole  | to /-//o . Resul                 | nea attitus.                                 |
| NOTE: Nippled up on 11-3/4" casing and pres  | ssure tested BOP                 | to 800 psi for 15 minutes,                   |
| ok.  |                                  |  |
| I hereby certify that the information above in tree and complete to the best of my knowledge as  |                                  | achnician Dec 23 1999                        |
| SIGNATURE - CONTROL - CONT | Operations To                    |  |
| TYPE OR PRINT NAME RUSTY Klein   |                                  | <u>тецерноме но. 505/748-1</u> 47            |
| (This space for State Use)   | District                         | Supervisor 1-4-00                            |
|  |                                  | / / / - / -                                  |

APPROVED BY-