## Submit 3 Copies to Appropriate

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

|     | Form C-10<br>Revised 1- |
|-----|-------------------------|
| -11 |                         |

| _ | dh | Weather | 1-1 |
|---|----|---------|-----|
|   | "  |         |     |

| District Office   | <del></del>  |                                     | M.                                  |  |                 |
|---|--|-------------------------------------|-------------------------------------|--|-----------------|
| DISTRICT I<br>20. Box 1980, Hobbs, NM 88240                     | OIL CONSERVATIO<br>P.O. Box 208  |                                     | WELL API NO.                        |  |                 |
| FIG. Box 2008  FIG. Box 2008  Santa Fe, New Mexico 87504-2088   |  | 30-005-63268                        |                                     |  |                 |
| D. Drawer DD, Artesia, NM 88210                                 | <b></b>  |                                     | 5. Indicate Type of Lease           | STATE X FEE                                  |                 |
| STRICT III<br>00 Rio Brazos Rd., Aztec, NM 87410                |  |                                     | 6. State Oil & Gas Lease<br>V-4     |  |                 |
| DO NOT USE THIS FORM FOR PF<br>DIFFERENT RESE                   | FICES AND REPORTS ON WEL<br>ROPOSALS TO DRILL OR TO DEEPEN<br>ERVOIR. USE "APPLICATION FOR PE<br>C-101) FOR SUCH PROPOSALS.) | OR PLUG BACK TO A                   | 7. Lease Name or Unit A             | Agreement Name                               |                 |
| Type of Well: OIL GAS WELL X                                    | OTHER  |                                     | Joe Kidd                            | l AWC State                                  |                 |
| Name of Operator ATES PETROLEUM CORPO                           |  |                                     | 8. Well No.                         | 1  |                 |
| Address of Operator<br>05 South 4th St., Ar                     |  |                                     | 9. Pool name or Wildcat Wildcat P   | recambrian                                   |                 |
| Well Location   |  | 100                                 | 20                                  | Fort   |                 |
| Unit Letter $\cancel{D} \mathcal{I} : \cancel{1}$               | 1980 Feet From The South   | Line and100                         | )0 Feet From The                    | East   | Line            |
| Section 14  | Township 12S R   | ange 27E                            | NMPM Ch                             | naves Con                                    | unty            |
|   | 10. Elevation (Show whether  | DF, RKB, RT, GR, etc.)              |                                     |  |                 |
|   | //////   | GR COVIN                            | V//                                 | <u>/////////////////////////////////////</u> |                 |
|   | Appropriate Box to Indicate  | Nature of Notice, F                 | Report, or Other Day                | ia<br>Optoe                                  |                 |
| NOTICE OF IN  | ITENTION TO:   | SUE                                 | BSEQUENT REP                        | JRT OF:                                      |                 |
| FORM REMEDIAL WORK  | PLUG AND ABANDON   | REMEDIAL WORK                       | ALTE                                | ERING CASING                                 |                 |
| MPORARILY ABANDON   | CHANGE PLANS   | COMMENCE DRILLIN                    | G OPNS. DPLU                        | G AND ABANDONME                              | ENT XX          |
| L OR ALTER CASING   |  | CASING TEST AND C                   | EMENT JOB                           |  |                 |
| HER:  |  | OTHER:                              |                                     |  | _ 🗆             |
| Describe Proposed or Completed Opework) SEE RULE 1103.          | erations (Clearly state all pertinent details, a   | nd give pertinent dates, incl       | uding estimated date of start       | ing any proposed                             |                 |
| TD 30'. Jim Krogman verbal permission from was plugged and abar | n, Drilling Superintende<br>com Mike Stubblefield w/<br>ndoned as follows:   | ent for Yates Pe<br>'OCD-Artesia to | etroleum Corpora<br>plug and abando | ition, receive<br>on well. Well              | ∍d<br>L         |
| from 5' to surface.   | sack mix Ready-Mix from<br>A dry hole marker was<br>ompleted January 5, 2001   | NOT installed.                      | ole was filled w PLUGGED AND AE     | vith top soil<br>BANDONED - FI               | NAL<br>S        |
|   |  | 5ez .                               |                                     | RECEIVED<br>OCD - ARTESIA                    | 3 4 5 6 7 8 9 7 |
| -   |  | A ballet                            |                                     | ्राभाग हो हो                                 | <del>}</del>    |
| hereby certify that the information above is                    | arue and complete to the best of my knowledge at   | Operations                          | Technician                          | The second section of                        | 2001            |
| IONATURE 1 VISUAL Y   |  | me Operations                       |                                     | DATE Jan. 24. TELEPHONE NO. 505/             |                 |
| YPEOR PRINT NAME RUSTY Kle                                      | ın   |                                     |                                     | IELEPTRINE NO. JOJ/                          |                 |
| This space for State UGRICINAL SI<br>DISTRICT H S               | GNED BY TIM W. GUM<br>SUPERVISOR   |                                     |                                     | W 31   | 2001            |
| 2.2   |  | TILE                                |                                     | DATE   |                 |

APPROVED BY -CONDITIONS OF AFFROVAL, IF ANY: