| | | C/2/V | ` | |
|---|--|---------------------------------|--|--|
| Submit 3 Copies To Appropriate District | District State of New Mexico | | Form C-103 | |
| Office District I | Engran Minarala and Natural Daggirage | | Revised March 25, 1999 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| <u>District II</u> 811 South First, Artesia, NM 88210 | ortesia, NM 88210 OIL CONSERVATION DIVISION | | 30-005-63298 | |
| District III | 1220 South St. Francis Dr. | | 5. Indicate Type of Lease STATE X FEE | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> | Santa Fe, NM 8/303 | | 6. State Oil & Gas Lease No. | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | VO-5523 | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit Agreement Name: | |
| (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.) | | | Vista AVS Stat | e |
| 1. Type of Well: | | | | |
| Oil Well X Gas Well Other | | | 7 777 13 37 | |
| 2. Name of Operator Yates Petroleum Corporation | | | 7. Well No. #5 | |
| 3. Address of Operator | | | 8. Pool name or Wildcat | |
| 105 S. 4 th Street Artesia, NM 88210 | | | Wildcat San Andres | |
| | | | Triadai dali Aliaica | |
| 4. Well Location | | | • | |
| | A | | | |
| Unit Letter A: 33 | feet from the North | line and330 | feet from the | tast line |
| Section 21 | Township 9S Range | 26E NN | mv Chav | |
| Section 21 | Township 9S Range 10. Elevation (Show whether D | | IPM Chave | es County |
| | 3700 | |) | |
| 11. Check A | ppropriate Box to Indicate N | | Report or Other | Data |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK ALTERING CASING X | | ALTERING |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRI | LLING OPNS. | PLUG AND |
| | MULTIPLE | CASING TEST A | ND | ABANDONMENT |
| PULL OR ALTER CASING | COMPLETION | CEMENT JOB | | |
| OTHER: | | OTHER: perforate | and acidize | X |
| Describe proposed or completed op | | | | |
| starting any proposed work). SEE F | RULE 1103. For Multiple Comple | etions: Attach wellb | ore diagram of prop | osed completion or |
| recompilation. | anor Tag PPID at 1/27! | | | |
| 11/17/00 – TiH with bit and scro 11/20/00 – Run CBL, good bor | | | | |
| Perforate San Andres 1538-154 | | holes and 1.558-1 | 568', 22 holes 4 | 1" |
| 11/21/00 - Acidize with 2400 g | | | 722 (10103) . (| (2) |
| 11/22 - 11/29/00 - Swab. No g | • | | | ∱ |
| 11/30/00 – Shut well in waiting | on further orders. | | | 2000 |
| | | | | RECEIVED |
| | | | | OCD - ARTECIA |
| | | | | "LOIA |
| I hereby certify that the information | above is true and complete to the | best of my knowled | ge and belief. | 100 122 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25 |
| SIGNATURE SIGNATURE | pro TITLE <u>E</u> | ngineering Tecl | nnician DATE | |
| Type or print name Susan Her | pin | | Telenhone | No. 505-748-1471 |
| (This space for State use) | | | Telephone | |
| • | | | | JAN 1 4 288 |
| APPPROVEI Conditions of | TLE_ | | | DATE |