

Submit 3 Copies To Appropriate
District Office
DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
DISTRICT II
811 South First, Artesia NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 S. Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.30-015-01023-00-00

5. Indicate Type of Lease
STATE ☐ FEE ☐ FED

6. State Oil & Gas Lease No.
C-063567

7. Lease Name or Unit Agreement Name:
YATES FEDERAL UNIT

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 ☐ Gas Well ☐ Other ☐

2. Name of Operator GUADALUPE OPERATING L.L.P.

3. Address of Operator 1407 W. CUTHBERT AVE. MIDLAND, TX. 79701

8. Well No. 7

9. Pool name or Wildcat
MCMILLAN 7RVS QUEEN

4. Well Location J 1650 SOUTH 1650 EAST
Unit letter : feet from the line and feet from the line
6 20S 27E EDDY
Section Township Range NMPM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3452 GR

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: X
☐ SEE BELOW

12. 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 recompilation.
9-25-2000 RIGGED PULLING UNIT PULLED TUBING AND PACKER. SENT PACKER FOR INSPECTION. PACKER RETURNED AND PROCEEDED TO RUN PACKER AND NEW STRING OF TUBING INTO WELL. IW TRUCKING INSTALLED CHART AND PRESSURED TO 480PSI ON CASING. HELD FOR 30 MINUTES PER INSTRUCTIONS. CHART EVIDENCING TEST ENCLOSED FOR FILE. FAILURE CAUSED BY TUBING LEAK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE JOHN BREEDLOVE TITLE GENERAL PARTNER DATE 9-28-2000
Type or print name Telephone No. 915-686-8632

(This space for State use)

APPROVED BY Travis Stillfield TITLE Field Rep. II DATE 10/3/2000
Conditions of approval, if any: