

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
March 4, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-36713
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VO-6057
7. Lease Name or Unit Agreement Name Dolly BER State Com
8. Well Number 1
9. OGRID Number 025575
4. Pool name or Wildcat Sand Springs; Mississippian (Gas)

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
Yates Petroleum Corporation

3. Address of Operator
105 South Fourth Street, Artesia, NM 88210

4. Well Location
Unit Letter M : 660 feet from the South line and 660 feet from the West line
Section 34 Township 10S Range 34E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4201' GR

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL Sect Twp Rng Pit type Depth to Groundwater Distance from nearest fresh water well
Distance from nearest surface water Below-grade Tank Location UL Sect Twp Rng ;
feet from the line and feet from the line

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>Surface and Intermediate Casing</u> <input checked="" type="checkbox"/>

13. 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 recompletion.

6-21-04 MIRT and spudded @ 12:30 p.m. Drilled 17-1/2" hole to 433'. Set 13-3/8" 48# casing @ 433'. Cemented w/220 sx Premium Plus w/additives and tailed in w/200 sx. Cement circulated. WOC 21 hrs, 15 min. Reduced hole to 12-1/4" and resumed drilling.

6-28-04 TD 12-1/4" hole to 4250' @ 7:15 a.m. Set 9-5/8" 36# and 40# casing @ 4250'. Cemented w/1180 sx Halliburton Lite Premium Plus w/additives and tailed in w/200 sx. Estimated TOC @ 400' (TS). Ran 1" to 422' and spotted 135 sx "C". Circulated 25 sx to pit. (Notified Sylvia Dickey w/NMOCD of TS and 1" cement job.) WOC 37 hrs, 30 min. Reduced hole to 8-3/4" and resumed drilling.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE: Stormi Davis TITLE: Regulatory Compliance Technician DATE: 7-6-04

Type or print name: Stormi Davis E-mail address: Telephone No. 505-748-1471

(This space for State use)

APPROVED BY Chris Williams TITLE: DC DISTRICT SUPERVISOR/GENERAL MANAGER DATE: JUL 09 2004
Conditions of approval, if any: