Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240	Revised May 08, 2003 WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-10790 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505	STATE 🔀 FEE 🗌
1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No. 016406
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	E. L. STEELER
PROPOSALS.) 1. Type of Well:	8. Well Number
Oil Well Gas Well A Other	8
2. Name of Operator YARBROUGH OIL, L.P.	9. OGRID Number 02-5504
3. Address of Operator P. O. BOX 1769 EUNICE, NM 88231	10. Pool name or Wildcat JALMAT
4. Well Location	
Unit Letter G: 1980 feet from the NORTH line and 1980 feet from the EAST line	
Section 17 Township 23S Range 37E NMPM LEA County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	☐ ALTERING CASING
TEMPORARILY ABANDON	LING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION CEMENT JOB	
OTHER: OTHER:	
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. 07-01-04 TO 07-08-04	
1. PULLED RODS & TUBING	23456789
2. INSTALL B.O.P.	
3. SET CAST B.P. @ 3100' 4. PERF. CASING 2643-2882	AND AND SEASON OF SEASON O
5. ACIDIZED WITH 2000 GAL. 10% N.E.F.E. ACID	
6. FRACKED - HALLIBURTON - 2000 BBL. GEL FRAC & 40,000#\SAND	
7. TEST WELL 200 T # 80 FLOWED 161 MCF GAS 8. TURNED WELL THROUGH DYNEGY METER 07-09-04	
o. Turked well Through Divider Helek 07-03-04	10 10 10 10 10 10 10 10 10 10 10 10 10 1
	SAND TO SESSES OF OF ONE OF
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Same North TITLE PARTNER	DATE_07-12-04
Type or print name PAUL PRATHER	Telephone No.505 394 2756
(This space for State use)	SEP 2 1 2004
APPPROVED BY	

2A Langlie Mattix