

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  
May 27, 2004

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

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|---|
| WELL API NO.<br>30-025-28871  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>LG-2414   |
| 7. Lease Name or Unit Agreement Name<br>Chalupa AAD State   |
| 8. Well Number<br>1   |
| 9. OGRID Number<br>025575   |
| 10. Pool name or Wildcat<br>Saunders Permo Upper Penn   |

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| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4181.3' GR |
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|--|
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>   |
| Pit type <u>Steel</u> Depth to Groundwater <u>N/A</u> Distance from nearest fresh water well <u>N/A</u> Distance from nearest surface water <u>N/A</u> |
| Pit Liner Thickness: <u>N/A</u> mil Below-Grade Tank: Volume <u>N/A</u> bbls; Construction Material <u>N/A</u>   |

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>P&amp;A</u>   |
| 2. Name of Operator<br>Yates Petroleum Corporation  |
| 3. Address of Operator<br>105 S. 4 <sup>th</sup> Street, Artesia, NM 88210  |
| 4. Well Location<br>Unit Letter <u>E</u> : <u>2310</u> feet from the <u>North</u> line and <u>330</u> feet from the <u>West</u> line<br>Section <u>13</u> Township <u>14S</u> Range <u>33E</u> NMPM <u>Lea</u> County |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4181.3' GR  |

12. 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 COMPL ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P & A ☒  
CASING/CEMENT JOB ☐  
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.

Approved as to plugging of the Well Bore.  
Liability under bond is retained until  
surface restoration is completed.

12-28-05 MIRU.

12-29-05 Released TAC. Worked tubing. Rotary wireline freepoint. Cut tubing @ 7900'. Pulled tubing.

12-30-05 RIH w/CICR per agreement w/OCD.

1-3-06 Set CICR @ 7884'. Squeezed 190 sx cement below CICR. Spotted 10 sx on top. PUH to 7045'. Spotted 45 sx 7045-6792'. PUH to 5667'.

1-4-06 Spotted 25 sx @ 5667'. WOC 4 hrs. Tagged @ 5412'.

1-5-06 to 1-8-06 Perforated casing @ 4292'. TIH w/tubing and packer and spotted 35 sx @ 4299'. Tagged plug @ 4011'. Perforated @ 2640'. TIH w/tubing and packer and spotted 30 sx 2640-2331'. Perforated @ 1840'. TIH w/tubing and packer and spotted 30 sx 1840-1535'. Perforated @ 500'. Squeezed w/35 sx. Well circulating on backside.

1-9-06 Perforated @ 60'. Squeezed 20 sx to surface leaving casing full. Cut off wellhead. Install marker. Clean location.

WELL IS PLUGGED AND ABANDONED. FINAL REPORT.

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 1-16-06

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

For State Use Only

APPROVED BY: Hayward Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JAN 23 2006  
Conditions of Approval (if any):