

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

WELL API NO. 30-025-36762
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA-1316
7. Lease Name or Unit Agreement Name East Sand Springs BGB State
8. Well Number 5
9. OGRID Number 025575
10. Pool name or Wildcat Eight Mile Draw; Permo Upper Penn

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4210' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 S. 4th Street, Artesia, NM 88210

4. Well Location
Unit Letter D : 250 feet from the North line and 315 feet from the West line
Section 7 Township 11S Range 35E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4210' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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: Recompletion Operations ☒

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.

- 3-26-06 Released RBP @ 12544' and TOO. Set 5-1/2" CIBP @ 12350' and capped w/35' cement.
3-27-06 Perforated Atoka (6 JSPF) 12194-12200' w/36 .42" holes.
3-28-06 Acidized Atoka w/1000 gal 7-1/2% Morrow acid w/50 balls.
3-30-06 Set 5-1/2" CIBP @ 12150' and capped w/35' cement. Perforated Middle Atoka (6 JSPF) 11967-11973' w/36 .42" holes.
4-3-06 Acidized Middle Atoka w/900 gal 7-1/2% Morrow acid w/50 balls.
4-7-06 Set 5-1/2" CIBP @ 11950' and capped w/35' cement. Perforated Strawn (4 JSPF) 11554-58' (20) and 11563-76' (16) w/total of 76 .42" holes.
4-10-06 Set 5-1/2" CIBP @ 11540' and capped w/35' cement.
4-11-06 Perforated Canyon (2 JSPF) 10814-22' (18) and 10893-905' (24) w/total of 42 .42" holes. Set RBP @ 10918'. Spotted 200 gal 15% NEFE acid @ 10905'.
4-12-06 Released RBP, pulled up to 10850' and set RBP.
4-13-06 Dumped 250 gal 15% NEFE acid.
4-16-06 Released RBP and TOO. TIH w/2-7/8" open-ended tubing to 10780'.
5-2-06 POOH w/tubing. Set CIBP @ 10800'. Perforated Bough 10042-46', (10), and Canyon 10418-22' (10) and 10446-51' (12).
5-4-06 Acidized 10042-46' w/100 gal 15% IC acid.
5-8-06 Set RBP @ 10510'. Swabbed Canyon perfs 10418-51'. Spotted 250 gal 15% IC acid.
5-11-06 Acidized Canyon w/1500 gal 15% IC acid and 25 balls.
5-15-06 TOO. w/RBP.

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Stormi Davis TITLE Regulatory Compliance Technician DATE 6-1-06

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

For State Use Only

APPROVED BY: Harry W. Wink TITLE _____ DATE JUN 20 2006

Conditions of Approval (if any)