

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. 30-025-36785
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA-1797
7. Lease Name or Unit Agreement Name Dempster State Unit
8. Well Number 2
9. OGRID Number 025575
10. Pool name or Wildcat Wildcat Wolfcamp

4. Well Location Unit Letter <u>L</u> : <u>1980</u> feet from the <u>South</u> line and <u>1150</u> feet from the <u>West</u> line Section <u>31</u> Township <u>11S</u> Range <u>36E</u> NMPM <u>Lea</u> County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4067' GR

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 P&A

2. Name of Operator
Yates Petroleum Corporation

3. Address of Operator
105 S. 4th Street, Artesia, NM 88210

4. Well Location
Unit Letter L : 1980 feet from the South line and 1150 feet from the West line
Section 31 Township 11S Range 36E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4067' 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:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	P & A <input checked="" type="checkbox"/>
	CASING/CEMENT JOB <input type="checkbox"/>
	OTHER: <input 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.

8-15-06 MIRU pulling unit. ND WH. NU BOP. POOH w/tubing.

8-16-06 Set CIBP @ 9800'.

8-17-06 Dumped 35' cement on top of CIBP @ 9800'. Circulated plugging mud and spotted 25 sx. PUH to 5802' and spotted 25 sx cement plug. PUH to 4458' and spotted 25 sx plug.

8-18-06 Tagged @ 4090'. Perforated @ 2200'. Pressured up to 1000#. Spotted 25 sx @ 2229'. WOC and tagged @ 1998'. Perforated @ 483'. RIH w/packer and pumped 45 sx. POOH.

8-21-06 Tagged @ 250'. Perforated @ 60'. Circulated 25 sx leaving casing full. Installed dry-hole marker. Cleaned location.

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

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

SIGNATURE Stormi Davis TITLE Regulatory Compliance Technician DATE 8-23-06

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

For State Use Only

APPROVED BY: Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE AUG 25 2006

Conditions of Approval (if any):