| Office Office | State of N | | | | | | C-103 | |
|---|---|---|--------------------------------------|--|------------------------------|---------------------|----------------------|--|
| District I | Energy, Minerals and Natural Resources | | | May 27, 2004 | | | | |
| 1625 N. French Dr., Hobbs, NM 88240 District II | | | | WELL API NO. 30-025-37652 | | | | |
| 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | 5. Indicate Type of Lease | | | | |
| <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STATE STATE FEE | | | | |
| District IV | Santa Fe, NWI 87505 | | | | 6. State Oil & Gas Lease No. | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | VA-2362 | | | |
| | ICES AND REPORTS ON | | C D A CV TO A | 7. Lease Nar | ne or Unit | Agreement l | 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 | | | | | Hoyt State | a I Init | | |
| PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other | | | | 8. Well Num | | ОШ | | |
| | | | | | 4 | | | |
| 2. Name of Operator Yates Petroleum Corporation | | | | 9. OGRID Number 025575 | | | | |
| 3. Address of Operator | | | | 10. Pool name or Wildcat | | | | |
| 105 S. 4 th Street, Artesia, 1 | Wildcat Mississippian | | | | | | | |
| 4. Well Location | | | | | | | | |
| | 990 feet from the | | _ | | from the | West | line | |
| Section 17 | | OS Ran | | NMPM | Lea | County | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc. 4137' GR | | | | | | | | |
| Pit or Below-grade Tank Application 0 | | | | Bes | | | - | |
| Pit type Depth to Groundwate | r Distance from near- | est fresh wa | ter well D | istance from neares | st surface wa | ter | | |
| Pit Liner Thickness: mil | Below-Grade Tank: Volu | ume | bbls; C | Construction Mater | ial | | | |
| 12. Check A | Appropriate Box to Inc | dicate Na | ture of Notice | , Report or Ot | her Data | | | |
| NOTICE OF IN | ITENTION TO: | 1 | SUE | BSEQUENT | REPOR | T OF: | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR | | | | | | | | |
| TEMPORARILY ABANDON | | | | |] P&A | | | |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/CEMEN | NT JOB [| | | | |
| OTHER: | | | OTHER: | Drilling | | | \boxtimes | |
| 13. Describe proposed or comp of starting any proposed we or recompletion. | leted operations. (Clearly ork). SEE RULE 1103. Fo | state all poor Multiple | ertinent details, an | nd give pertinent | dates, incl liagram of p | uding estimated con | ated date | |
| 10-11-06 Made 5' of new hole. TD | =75'. Notified Sylvia Dicl | key w/Hob | obs NMOCD via | email. | / \$ | Oly Colived | | |
| I hereby certify that the information grade tank has been/will be constructed or SIGNATURE Type or print name Stormi Da For State Use Only APPROVED BY: | vis E-mail | uidelines [_] TTLE <u>Re</u> address: | , a general permit egulatory Compli | or an (attached) a ance Technician Telep | DAT | TE 10-12-0 | olan □. 06 471 | |
| Conditions of Approval (if any) | J.WMC T | I OC FIEL | D REPRESENTA | TIVE II/STAFF / | HOAMAN | E 001 | 1 6 200 | |