

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
Revised May 08, 2003

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

WELL API NO. 30-025-10787
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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
YARBROUGH OIL, L.P.

3. Address of Operator
P.O. BOX 1769

4. Well Location

Unit Letter **K** : **1980** feet from the **S** line and **1980** feet from the **W** line

Section **17** Township **23S** Range **37E** NMPM County **LEA**

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

7. Lease Name or Unit Agreement Name

E.L. STEELER

8. Well Number

5

9. OGRID Number

036851

10. Pool name or Wildcat

YATES SEVEN RIVERS JALMAT

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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

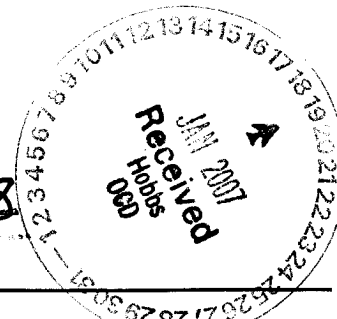
CASING TEST AND CEMENT JOB ☐

OTHER: **TA'D** ☐

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.

1. INSTALL B.O.P. BEFORE WORK BEGINS
2. PULL TBG. + RODS
3. RUN CAST IRON BRIDGE PLUG TO 2500'
4. TEST CSG.
5. LOAD WITH 2% KCL WATER
6. TA

This Approval of Temporary Abandonment Expires **1/31/08**



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE **Pam Pitzer**

TITLE **Pitzer**

DATE **9-26-03**

Type or print name

Telephone No.

(This space for State use)

APPROVED BY **Mary W. Wink**

TITLE **STATE MANAGER**

DATE **SEP 26 2003**

Conditions of approval, if any

CC FIELD REPRESENTATIVE

