

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

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

Form C-103
May 27, 2004

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.)		WELL API NO. 30-025-37982
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Yates Petroleum Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 105 S. 4 th Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Raitt BID State
4. Well Location Unit Letter P : 990 feet from the South line and 660 feet from the East line Section 35 Township 10S Range 32E NMPM Lea County		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4308' GR		9. OGRID Number 025575
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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: Completion 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.

3-14-07 Perforated Atoka (6 JSPF) 11011-11020' w/60 .42" holes.
3-16-07 Acidized Atoka w/500 gal 7-1/2% Morrow acid w/50 balls.
3-21-07 Set CIBP @ 11000' w/35' cement. Perforated Strawn (2 SPF) 10062-71', 10142-49' and 10339-48' w/56 holes.
3-22-07 Acidized 10339-10348' w/1000 gal 15% NEFE acid w/25 ball sealers.
3-23-07 Acidized 10142-10149' w/1000 gal 15% IC acid and 20 balls.
3-26-07 Acidized 10062-10071' w/1000 gal 15% NEFE w/25 balls.
3-28-07 Acidized 10142-10149' w/3000 gal 15% NEFE w/25 balls.
4-2-07 Set 5-1/2" CIBP @ 10300' and capped w/35' cement. Set CIBP @ 10130'. Set 5-1/2" cement retainer @ 10030'.
4-3-07 Squeezed perfs 10062-10071' w/50 sx Class "H" Neat and 50 sx Class "H" w/fluid loss. Squeezed to 4700# w/95 sx in formation. Perforated Canyon 9970-9978' w/18 .40" holes.
4-4-07 Acidized Canyon w/1000 gal 15% NEFE w/25 balls.
4-6-07 Drilled out retainer and cement. Fell out @ 10073'. Drilled out CIBP @ 10130'. TOC @ 10255'.
4-9-07 Perforated Penn (2 JSPF) 9234-42' (18), 9264-86' (46), 9345-47' (6), 9352-60' (18) and 9398-9402' (10) for total of 98 .40" holes. Acidized 9345-9402' w/1500 gal 15% NEFE w/40 balls. Acidized 9234-9402' w/2500 gal 15% NEFE w/100 balls.
4-12-07 Set RBP @ 9471'. Spotted 3 sx 20/40 sand. Set 5-1/2" cement retainer @ 9180'. Squeezed Penn perfs w/200 sx "H" Neat to 5000# w/120 sx in formation.
4-14-07 Drilled out cement and retainer. Fell out @ 9405'. Test squeezed perfs to 500#. Held for 5 mins.
4-16-07 Circulated and washed off RBP. Latched and released RBP.

2-7/8" tubing @ 10232'

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 4-24-07

Type or print name Stormi Davis E-mail address: _____ Telephone No. 505-748-1471

For State Use Only

APPROVED BY: [Signature] TITLE _____ DATE MAY 07 2007

Conditions of Approval (if any): _____