

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

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. 30-025-29193 ✓
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 HARVEY E. YATES COMPANY		6. State Oil & Gas Lease No. LG-1784
3. Address of Operator PO BOX 1933 ROSWELL NM 88202		7. Lease Name or Unit Agreement Name AMOCO EAST 2 STATE ✓
4. Well Location Unit Letter <u>O</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>2</u> Township <u>18S</u> Range <u>32E</u> NMPM County <u>LEA</u>		8. Well Number 004 ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3877.7' GL		9. OGRID Number 10179 ✓
10. Pool name or Wildcat YOUNG BONE SPRING, NORTH		
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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <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.

THE WELL WAS PLUGGED AND ABANDONED AS FOLLOWS:

DUMP 6 SX CLASS 'H' ON TOP OF CIBP @ 8350'. TOC AT 8293' RIH WITH TUBING AND SPOT 25 SX CEMENT FROM 5300' TO 5060'. CUT AND PULL 5 1/2" CSG @ 2865'. SPOT 50 SX PLUG @ 2915'. WOC. TAG CMT AT 2708'. SPOT 35 SX PLUG AT 575' RIH AND TAG TOC @ 442' SPOT SURFACE PLUG AND INSTALL DRY HOLE MARKER.

12/17/07
per JS

RECEIVED

FEB 21 2008

HOBBS OCD

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms, www.cmr.nd.state.nm.us/ocd.

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 Jeanette Serrano TITLE PRODUCTION ANALYST DATE 2/15/08

Type or print name
For State Use Only

E-mail address: jatkinson@heyco.org

Telephone No. 505.623.6601

APPROVED BY: Mary W. Wink
Conditions of Approval (if any):

OC FIELD REPRESENTATIVE II/STAFF MANAGER
DATE FEB 25 2008