

Submit 3 copies to Appropriate District Office

DISTRICT I

1625 N. French Dr., Hobbs NM 88240

DISTRICT II

1301 W. Grand Avenue, 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, New Mexico 87504-2088

Form C-103

Revised March 25, 1999

WELL API NO. 30-025-36384
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. VO-5629
7. Lease Name or Unit Agreement Name Kris State Unit
8. Well No. 1
9. Pool Name or Wildcat Eight Mile Draw, Mississippian

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
Yates Petroleum Corporation

3. Address of Operator
105 South 4th Str., Artesia, NM 88210

4. Well Location
Unit Letter D : 1300 feet from the North line and 990 feet from the West line
Section 28 Township 11S Range 34E NMPM County Lea

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4188' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

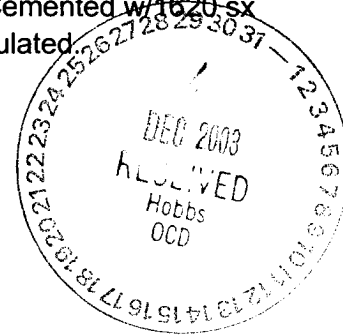
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Production Casing ☒

12. 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.

12-20-03 TD 8-3/4" hole to 12580' @ 2:30 a.m. Ran 5-1/2" 17# casing set @ 12580'. Cemented w/1620 sx 35:65:6 "H" w/additives. Tailed in w/1356 sx Super C Modified w/additives. Cement circulated.



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

SIGNATURE Stormi Davis TITLE Regulatory Compliance Technician DATE 12/23/03

Type or print name Stormi Davis Telephone No. 505-748-1471

(This space for State use)

APPROVED BY Dary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JAN 02 2004

Conditions of approval, if any: