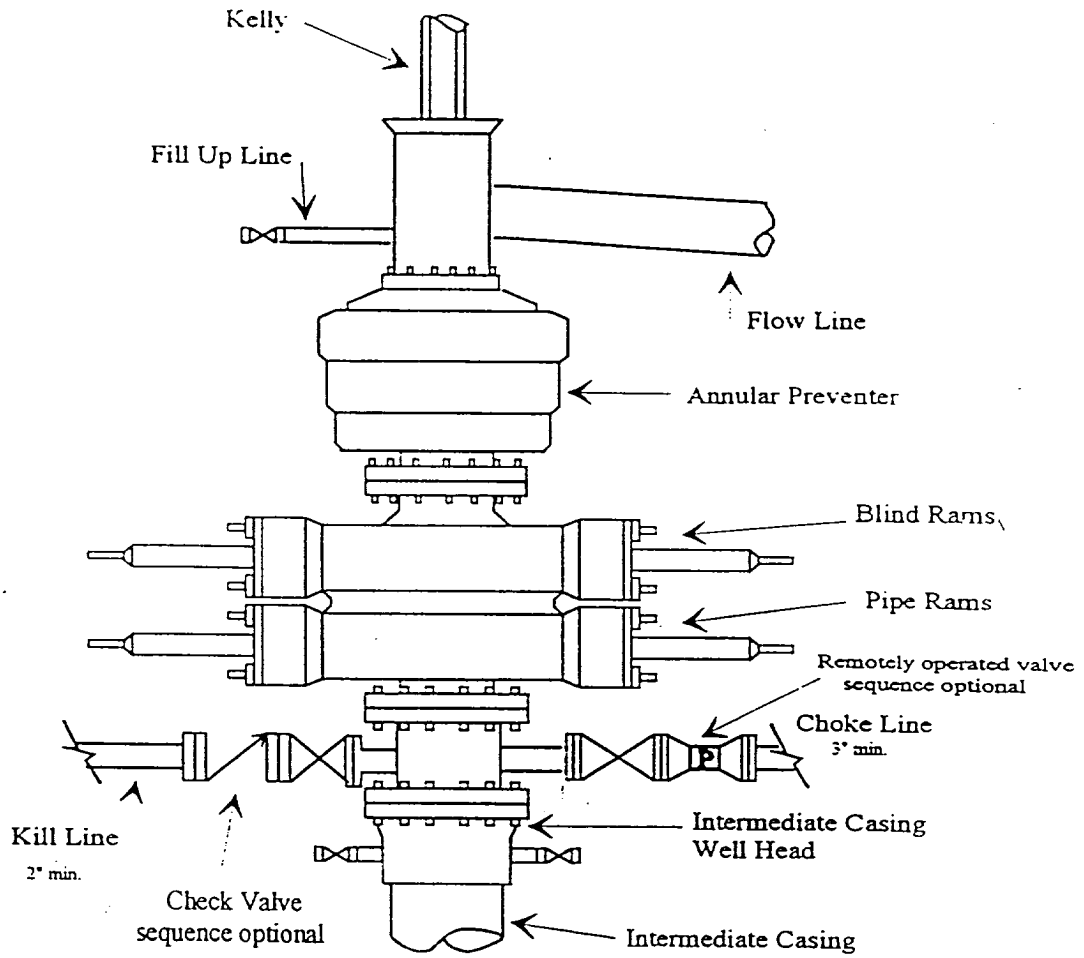
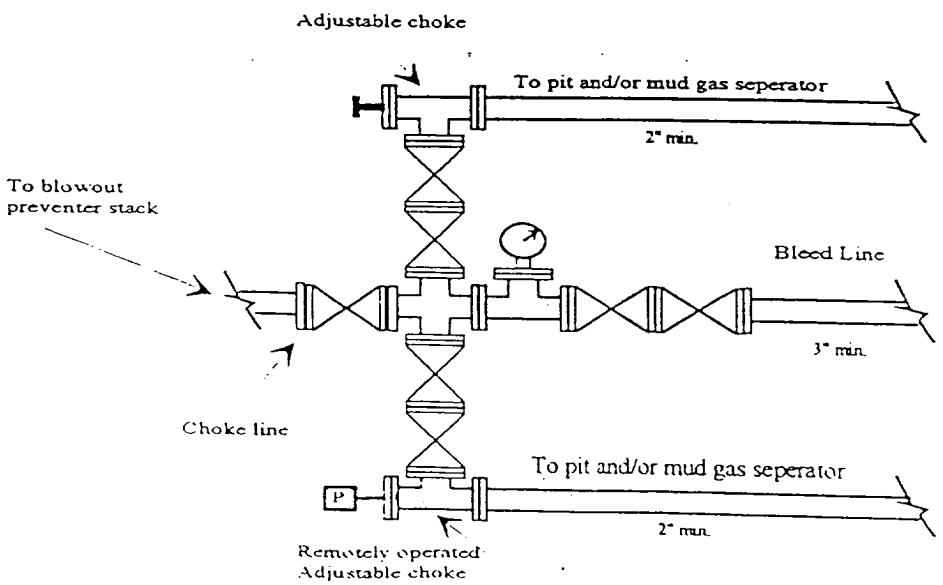
Yates Petroleum Corporation

Typical 5,000 psi Pressure System
Schematic
Annular with Double Ram Preventer Stack



Typical 5,000 psi choke manifold assembly with at least these minimun features



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State ☐ Fee ☒

5. State Oil & Gas Lease No.: Fee

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. OIL WELL ☐ GAS WELL ☐ OTHER- SWD

7. Unit Agreement Name:

2. Name of Operator: A. F. Roberts Jr.

8. Farm or Lease Name: Bogle Farms

3. Address of Operator: C/o Oil Reports & Gas Service Inc Box 763 Hobbs N.M.

9. Well No.: 1

4. Location of Well: UNIT LETTER M, 660 FEET FROM THE S LINE AND 660 FEET FROM THE W LINE, SECTION 16 TOWNSHIP 11 RANGE 34 NMPM.

10. Field and Pool, or Wildcat:

15. Elevation (Show whether DF, RT, GR, etc.)

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		OTHER ☐	

17. 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.

1) Spot 100 sx plug at 4200 – Tag no fill
Spot another 100sx at 4200 – Tag at 4190
Spot 100 sx 4190 Tag at 4000

2) load Hole w/ 10# Salt Gel

3) 25 sx plug 427 shoe.

4) 10 sx Surface plug & Marker

All plugging operations witnessed by State.
Bolan well service completed work.

PA June 1987

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

SIGNED Elbert W Bolan TITLE _____ DATE _____

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE AUG 17 1987

CONDITIONS OF APPROVAL, IF ANY: