Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

OIL CONSERVATION DIVISION IN

| _            |  |
|--------------|--|
| WELL API NO. |  |
| 30-025-34859 |  |
|              |  |

| P.O. Box 1980, Hobba, NM 88240 P.O. Box 2088                                                                                                                                                         | 30-025-34859                                   |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--|--|--|
| DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210                                                                                                                        | 5. Indicate Type of Lease STATE X FEE          |  |  |  |
| DISTRICT III<br>1000 Rio Brazos Rd., Azlec, NM 87410                                                                                                                                                 | 6. State Oil & Gas Lease No. VO-5606           |  |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  (FORM C-101) FOR SUCH PROPOSALS.) | 7. Lease Name or Unit Agreement Name           |  |  |  |
| 1. Type of Well: Officer Well X Well OTHER                                                                                                                                                           | Blitzen AUB State                              |  |  |  |
| 2. Name of Operator YATES PETROLEUM CORPORATION                                                                                                                                                      | 8. Well No. 2                                  |  |  |  |
| 3. Address of Operator 105 South 4th St., Artesia, NM 88210                                                                                                                                          | 9. Pool name or Wildcat<br>Wildcat Devonian    |  |  |  |
| 4. Well Location  Unit Letter P: 800 Feet From The South Line and                                                                                                                                    | 850 Feet From The East Line                    |  |  |  |
| Section 16 Township 11S Range 34E                                                                                                                                                                    | NMPM Lea County                                |  |  |  |
| 10. Elevation (Show whether Dr., RRD, RT, GR, Etc.) 4150' GR                                                                                                                                         |                                                |  |  |  |
| 11. Check Appropriate Box to Indicate Nature of Notice NOTICE OF INTENTION TO:                                                                                                                       | e, Report, or Other Data SUBSEQUENT REPORT OF: |  |  |  |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK                                                                                                                                                 | ALTERING CASING                                |  |  |  |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL                                                                                                                                                       | LLING OPNS. PLUG AND ABANDONMENT               |  |  |  |
| POLE ON ALTER CASING                                                                                                                                                                                 | CASING TEST AND CEMENT JOB                     |  |  |  |
| OTHER: Proc                                                                                                                                                                                          | OTHER: Production casing & cement X            |  |  |  |

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.

TD 13000'. Reached TD at 11:45 PM 4-9-2000. Ran 293 joints of 7" S/P-110 26# (13007.28') of casing set at 13000'. Float shoe set at 13000'. Float collar set ta 12959'. Bottom marker set at 11331'. Top marker set at 7040'. Cemented with 515 sacks Interfill "H", 1/4#/sack flocele, 1/10% HR7 (yield 2.77, weight 11.5). Tailed in with 450 sacks Super H, .5% Halad 344, .4% CFR3, 1#/sack salt, .3% HR7 and 5#/sack gilsonite (yield 1.65, weight 13.0). PD 1:25 AM 4-13-2000. Bumped plug to 2700 psi for 5 minutes, OK. WOC. NOTE: Displaced casing with 2% KCL. Released rig at 12:00 PM 4-13-2000.

Waiting on completion unit.

CONDITIONS OF APPROVAL, IF ANY:

| I hereby certify that the information above is frue to     | d complete to the best of my knowledge and belief.  TITLE Opera | tions Technician | DATE April 15, 2000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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| TYPE OR PRINT NAME Rusty Klein  (This space for State Use) |                                                                 |                  | IEEE MARIE OF THE STATE OF THE |
| (1000 Space for Some Only                                  | ıme —                                                           |                  | DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |