

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

PERMIT IN TRIPPLIO
COLUMBIA INSTITUTIONS
FOR SHIP

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0354427-A

6. IS INDIAN, ALLOTTEE OR TRIBE NAME

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" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Harvey E. Yates Company, Inc.		8. FARM OR LEASE NAME Amoco Federal	
3. ADDRESS OF OPERATOR P. O. Box 1933, Roswell, New Mexico 88201		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' ENL & 1980' FEL		10. FIELD AND POOL, OR WILDCAT Cato-San Andres	
14. PERMIT NO.		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T-8S, R-30E	
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 4192' GL (corrected)		12. COUNTY OR PARISH Chaves	
		13. STATE N. M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give sub-surface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

This Form C-103 is submitted to show a correction on the elevation of this location.
Attached to this form is a corrected Form C-102 showing the correct elevation.

RECEIVED

OCT 3 1977

D. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

RECEIVED

OCT 11 1977

18. I hereby certify that the foregoing is true and correct:

SIGNED <i>Fred E. Yates</i>	TITLE Vice President	DATE 9-28-77
(This space for Federal or State office use)		
APPROVED BY <i>John L. Lee</i>	TITLE ACTING DISTRICT ENGINEER	DATE OCT 7 - 1977
CONDITIONS OF APPROVAL, IF ANY:		

NE' MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-68

All distances must be from the outer boundaries of the Section.

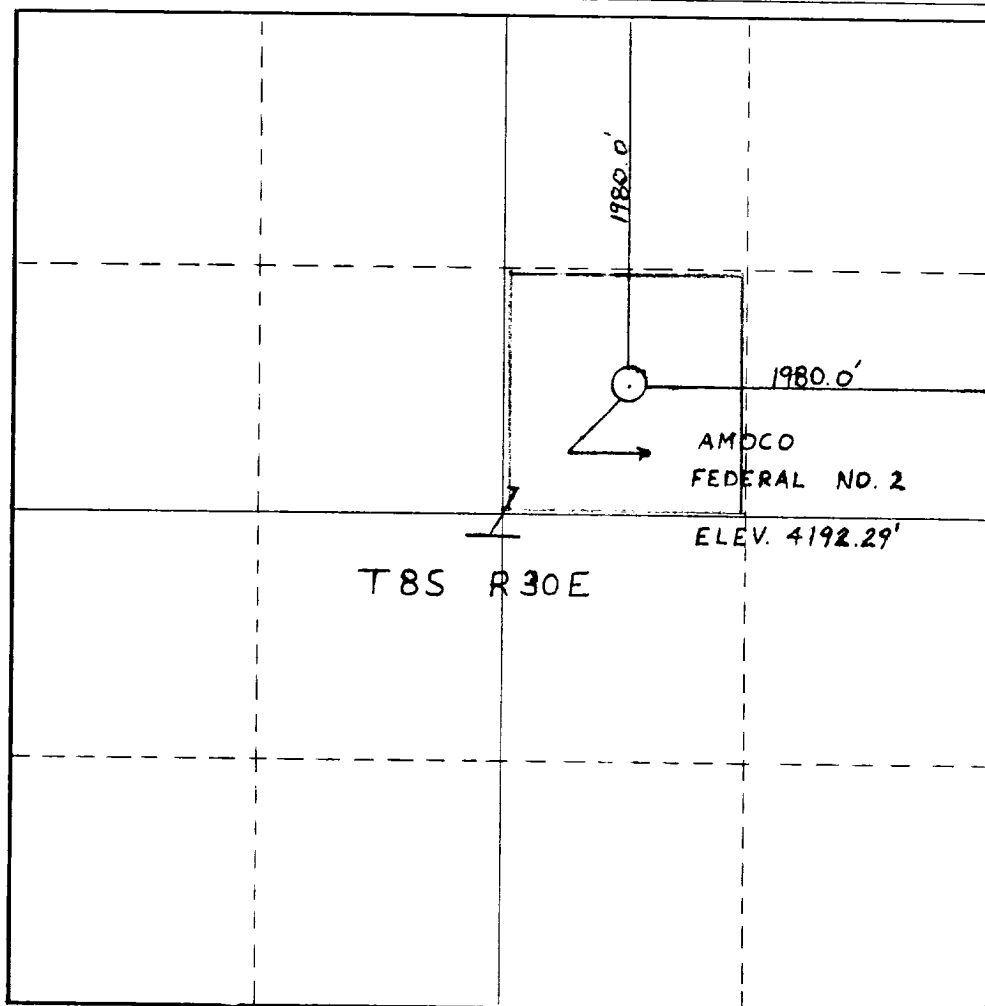
Operator Harvey E. Yates Company, Inc.			Lease Amoco Federal		Well No. Amoco Federal No. 2
Unit Letter G	Section 1	Township 8S	Range 30E	County Chaves	
Actual Plotage Location of Well:					
1980.0 feet from the North line and		1980.0 feet from the East line			
Ground Level Elev. 4192.29	Producing Formation San Andres		Pool Cato-San Andres	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Name _____

Position _____

Vice President

Company _____

Harvey E. Yates Co., Inc.

Date _____

October 1, 1977

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed _____

8-17-77

Registered Professional Engineer and/or Land Surveyor

[Signature]

Certificate No. _____

#277

