

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
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30 005 20982
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. -

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water injection well		7. Lease Name or Unit Agreement Name Doyal	
2. Name of Operator Yates Drilling Company		8. Well No. 3	
3. Address of Operator 105 South 4th Street, Artesia, NM 88210		9. Pool name or Wildcat SE Chaves On Gas Area Assoc.	
4. Well Location Unit Letter I : 1980 Feet From The South Line and 990 Feet From The East Line Section 27 Township 12S Range 31E NMPM Chaves County		10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4429' GR	

11. 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Hole in tubing <input checked="" type="checkbox"/>	

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.

3-30-99 RUPU

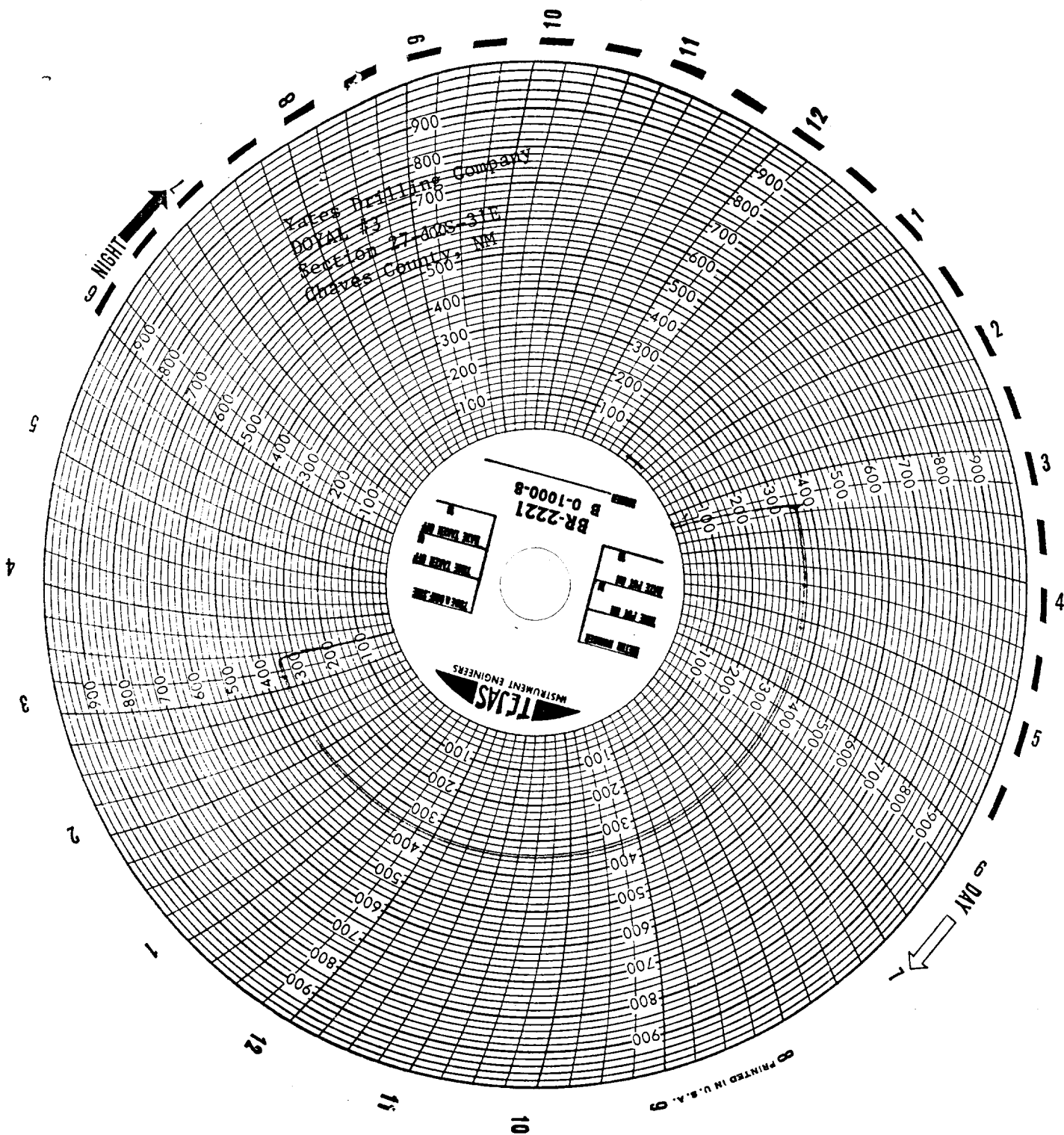
3-31-99 Unseated packer. POH with plastic coated tubing and packer, found hole in bottom joint of tubing and hole in packer. Replaced bad joint of tubing. RIH with plastic coated tubing and AD1 nickel plated tension packer. Circulated packer fluid and set packer at 2929'. Tested casing to 350 psi for 30 min., held okay. NMOC D was notified but did not witness. Chart attached.

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

SIGNATURE Karen J. Lashman TITLE Engineering Technician DATE 4-15-99
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:



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OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-005-20982
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Doyal
8. Well No. 3
9. Pool name or Wildcat SE Chaves On Gas Area Assoc.

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 <input type="checkbox"/> GAS <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection Well	7. Lease Name or Unit Agreement Name Doyal
2. Name of Operator Yates Drilling Company	
3. Address of Operator 105 South 4th Street, Artesia, NM 88210	
4. Well Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>27</u> Township <u>12S</u> Range <u>31E</u> NMPM <u>Chaves</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4429' GL	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Convert to WIW</u> <input checked="" type="checkbox"/>

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.

8-28-90 WIH with 5½" casing scrapper to 3068'. Came out of hole with scrapper. Ran 5½" Baker Tension Packer and 2 3/8" seating nipple, both nickel plated. Ran 93 jts. 2 3/8" plastic coated tbg., set at 2925.92'.

1-15-91 Acidized with 500 gals. 15% acid + 10% xylene. Displaced with 2% KCL water. Placed well on injection.

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

SIGNATURE Karen J. Luskman TITLE Production Clerk DATE 1-28-91

TYPE OR PRINT NAME: _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY: _____ TITLE: _____ DATE: _____

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OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. <u>30-005-20922</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. —
7. Lease Name or Unit Agreement Name Doyal
8. Well No. 3
9. Pool name or Wildcat SE Chaves On Gas Area Assoc.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Yates Drilling Company	
3. Address of Operator 105 South 4th Street, Artesia, NM 88210	
4. Well Location Unit Letter <u>H I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>27</u> Township <u>12S</u> Range <u>31E</u> NMPM <u>Chaves</u> County <u></u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>4429' GL</u>	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Convert to Water Injection Well</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

We propose to convert the subject well to water injection under the provisions of order R-9075 and R-9075-B.

1. Flush perforations w/1000 gals. 7½% HCL.
2. Set plastic lined tbg. @ approximatley 2941' w/ injection packer.
3. Fill annulus w/ inert fluid.
4. Commence injection.

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

SIGNATURE Tobin L. Rhodes TITLE Engineer DATE 8-1-90

TYPE OR PRINT NAME Tobin L. Rhodes TELEPHONE NO. 748-1471

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 02 1990

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STATE OF NEW MEXICO
OIL AND MINERALS DEPARTMENTOIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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SANTA FE	
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LAND OFFICE	
OPERATOR	

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

TYPE OF WELL

OIL WELL ☒GAS WELL ☐DRY ☐

OTHER _____

TYPE OF COMPLETION

NEW WELL ☐WORK OVER ☐DEEPEN ☐PLUG BACK ☐DIFF. RESVR. ☐

OTHER T.A.

Name of Operator

Yates Drilling Company

Address of Operator

207 South 4th Street, Artesia, N.M. 88210

Location of Well

Y LETTER I LOCATED 1980 FEET FROM THE South LINE AND 990 FEET FROMEast LINE OF SEC. 27 TWP. 12-S RGE. 31-E NMPM

Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
9-20-84	9-25-84	T.A.	4429' GR	-
Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools
3100'	3095'	-	0-3100'	Cable Tools
Producing Interval(s), of this completion - Top, Bottom, Name				25. Was Directional Survey Made
2991-97', Queen				no

Type Electric and Other Logs Run

Compensated Neutron-Litho Density, Dual Laterolog

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	409'	12 1/4"	260 SXS.	
5 1/2"	14#	3099'	7 7/8"	850 SXS.	

LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

Perforation Record (Interval, size and number)

2991'-97', 14, .50" holes (2 SPF)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
2991-97'	Acidized & frac'd w/ 750 gals. 15% HCL acid, 15000 gals. Water
	Frac 30, 25% CO2, 20000# 20/40 & 10000# 10-20 sand.

PRODUCTION

1. Date First Production	2. Production Method (Flowing, gas lift, pumping - Size and type pump)				3. Well Status (Prod. or Shut-in)	
T.A.	-----				T.A.	
4. No. of Test	5. Hours Tested	6. Choke Size	7. Prod'n. For Test Period	8. Oil - Bbl.	9. Gas - MCF	10. Water - Bbl.
11. Flow Tubing Press.	12. Casing Pressure	13. Calculated 24-Hour Rate	14. Oil - Bbl.	15. Gas - MCF	16. Water - Bbl.	17. Oil Gravity - API (Corr.)
18. Disposition of Gas (Sold, used for fuel, vented, etc.)						19. Test Witnessed By

20. List of Attachments

Deviation Survey

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED

Karen J. Lewishman

TITLE

Production Clerk

DATE

2-7-86

SUPERVISOR 2-12-87 (2nd)

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy <u>1435'</u>	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt <u>1508'</u>	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Salt <u>2106'</u>	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates <u>2229'</u>	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers <u>2366'</u>	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen <u>2989'</u>	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinbry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from _____ to _____	No. 4, from _____ to _____
No. 2, from _____ to _____	No. 5, from _____ to _____
No. 3, from _____ to _____	No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet
No. 2, from _____ to _____ feet
No. 3, from _____ to _____ feet
No. 4, from _____ to _____ feet

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	409	409	Surface, Rock Redbeds				
409	1438	1029	Redbeds, Anhydrite				
1438	2096	658	Salt				
2096	2976	880	Anhydrite, lime, sand, dolomite, shale				
2976	T.D.	124	Sand, dolomite, salt, anhydrite				

ARTESIA FISHING TOOL COMPANY

P. O. BOX ~~XX~~ PHONE (505) 746-6651
470

ARTESIA, NEW MEXICO 88210

September 28, 1984

Yates Drilling Company
207 South Fourth Street
Artesia, NM 88210

Re: Doyal #3
1980' FSL & 990' FEL
Sec. 27, T12S, R31E
Eddy County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above captioned well.

DEPTH	DEVIATION
411'	1/4°
939'	3/4°
1507'	3/4°
2003'	1°
2284'	1/4°
2838'	1/4°
3100'	1°

Very truly yours,

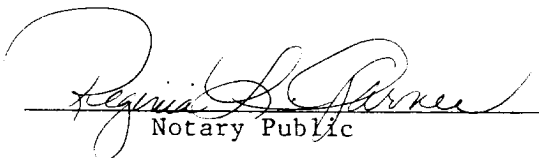


B. N. Muncy Jr.
Secretary

BNM/rlg

STATE OF NEW MEXICO §
COUNTY OF EDDY §

The foregoing was acknowledged before me this 28th day of September, 1984.


Notary Public