

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. 30-015-28871
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LG 2414
7. Lease Name or Unit Agreement Name Chalupa AAD State
8. Well No. 1
9. Pool name or Wildcat Saunders Permo Upper Penn

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 St., Artesia, NM 88210
4. Well Location

Unit Letter E : 2310 Feet From The North Line and 330 Feet From The West Line

Section 13 Township 14S Range 33E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4181.3' 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Perforate & treat existing zone ☒

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.

3-30-92. RUPU. TOH w/rods and pump. Perforated 9428-9623' w/44 - .42" holes (2 SPF) as follows: 9428, 34, 36, 41, 43, 84, 86, 9513, 14, 15, 58, 60, 9574, 94, 96, 9603, 05, 14, 18, 21, 22 and 9623'. Acidized perms 9428-9623' w/3500 gals 15% HLC NEFE acid. TOOH w/packer and RBP. Put well on pump. Return well to production. Work completed 4-1-92.

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

SIGNATURE Juanita Goodlett TITLE Production Supervisor DATE 4-14-92
TYPE OR PRINT NAME Juanita Goodlett TELEPHONE NO. 505/748-1471

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 16 '92