

STATE OF NEW MEXICO.  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |  |
|------------------------|--|
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| LAND OFFICE            |  |
| OPERATOR               |  |

|                                                                                                      |
|------------------------------------------------------------------------------------------------------|
| 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>LG 3818                                                              |
| 7. Unit Agreement Name                                                                               |
| 8. Firm or Lease Name<br>Pyro ABK State                                                              |
| 9. Well No.<br>1                                                                                     |
| 10. Field and Pool, or Wildcat<br>Und. Lazy J Penn                                                   |
| 11. County<br>Lea                                                                                    |

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                               |
| 2. Name of Operator<br>Yates Petroleum Corporation                                                                                             |
| 3. Address of Operator<br>207 South 4th St., Artesia, NM 88210                                                                                 |
| 4. Location of Well<br>UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM<br>THE East LINE, SECTION 33 TOWNSHIP 13S RANGE 33E NMPM. |

|                                                             |
|-------------------------------------------------------------|
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>4243.5' GR |
|-------------------------------------------------------------|

|                                                                              |                                                       |
|------------------------------------------------------------------------------|-------------------------------------------------------|
| 16. 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"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>      |
| PULL OR ALTER CASING <input type="checkbox"/>                                | CASING TEST AND CEMENT JOBS <input type="checkbox"/>  |
| OTHER <input type="checkbox"/>                                               | OTHER Well status <input checked="" type="checkbox"/> |
| PLUG AND ABANDON <input type="checkbox"/>                                    | ALTERING CASING <input type="checkbox"/>              |
| CHANGE PLANS <input type="checkbox"/>                                        | PLUG AND ABANDONMENT <input type="checkbox"/>         |

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.

Well pumping since 3-12-85. Continue to evaluate before testing another zone.

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

|                                            |                                    |                    |
|--------------------------------------------|------------------------------------|--------------------|
| SIGNATURE <u>Eddie W. Seay</u>             | TITLE <u>Production Supervisor</u> | DATE <u>5-6-85</u> |
| APPROVED BY <u>Oil &amp; Gas Inspector</u> | TITLE _____                        | DATE _____         |
| CONDITIONS OF APPROVAL, IF ANY:            |                                    |                    |

MAY 9 1985