Submit 3 Copies to Appropriate District Office

State of New Mexico

inerals and Natural Resources Department Energy

Form C·103 Revised 1-1-89

DISTRICTI

OIL CONSERVATION DIVISION

WELL API NO.

| P.O. Box 1980, Hobbs, NM 88240 | P.O. Box 2088 | | 30-025-35319 | | |
|---|--|--|---------------------------------------|---|----------|
| DISTRICT II P.O. Drawer DD, Artesia, NM 88210 | Santa Fe, New Mexico 8 | 5. Indicate Type of Lease | STATE X FE | E 🗌 | |
| DISTRICT III 1000 Rio Brazot Rd., Aziec, NM 87410 | | | 6. State Oil & Gas Lease No. VA-1439 | | |
| (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO | S AND REPORTS ON WELL OSALS TO DRILL OR TO DEEPEN O ORR. USE "APPLICATION FOR PER I) FOR SUCH PROPOSALS.) | OH PLUG BACK TO A | 7. Lease Name or Unit A | greement Name | |
| 1. Type of Well: OIL OAS WELL WELL X | OTHER | | Dome Nonom | bre AWZ Sta | t e |
| 2. Name of Operator | | | 8. Well No. | 2 | |
| YATES PETROLEUM CORPORAT | ION | | 9. Pool name or Wildcat | | |
| 3. Address of Operator 105 South 4th St., Artes | ia, NM 88210 | | | ississippia | n |
| 4 Wall Landing | _ Feet From TheNorth | Line and 1980 |) Feet From The | West | Line |
| Unit Letter : : : : | Feet From The | Line and | _ | | |
| Section 31 | Township 13S Ran | | NMPM Lea | ווווווווווווווווווווווווווווווווווווווו | County |
| | 10. Elevation (3,000 whether 1 | | | | |
| Chaolt As | propriate Box to Indicate N | Nature of Notice, R | eport, or Other Da | ta | |
| Check Appropriate Box to Indicate Nature of Notice, F. NOTICE OF INTENTION TO: SUE | | | BSEQUENT REPORT OF: | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK ALTERING CASING | | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT | | | |
| PULL OR ALTER CASING | | CASING TEST AND CE | EMENT JOB | | |
| OTHER: | | OTHER: Drill | | | <u> </u> |
| 12. Describe Proposed or Completed Operatio work) SEE RULE 1103. | | | | | |
| 4-9-2001 - Drilled 5' Sylvia w/OCD-Hobbs via | of new hole (12-1/4") voice mail. | . TD 35'. Shu | t down. NOTE: | Notified | , |
| I hereby certify that the information above is much signature. SKONATURE Rusty Klein | ۱ n . / | ibele. ne Operations ' | | DATE June 29 TELEPHONE NO. 50 | |
| (This space for State Use) | | ografi | - 19 d 37 | 70 | SOOT. |

APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY:

* AL THE