

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. 30-025-28183
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 Scott
8. Well No. #1
9. Pool name or Wildcat N.E. Caudill Wolfcamp

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	2. Name of Operator Harvey E. Yates Company
3. Address of Operator P.O. Box 1933, Roswell, New Mexico 88202	4. Well Location Unit Letter L : 1830 Feet From The South Line and 660 Feet From The West Line Section 1 Township 15S Range 36E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3874.4 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 checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <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.

Set RPB @ 10700
Perforate Wolfcamp @ 10566-74 (2 spf)
Acidize perfs & Swab test

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

SIGNATURE N.M. Young by D.T. TITLE Drilling Superintendent DATE 4/27/89
TYPE OR PRINT NAME N.M. Young TELEPHONE NO. 623-6601

(This space for State Use)

Eddie W. Seay
Oil & Gas Inspector

APPROVED BY _____ TITLE _____ DATE MAY 1 1989
CONDITIONS OF APPROVAL, IF ANY: