

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. 30-025-30769
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB 0015
7. Lease Name or Unit Agreement Name Daisy AFS State
8. Well No. 1
9. Pool name or Wildcat NE Eidson Mississippian

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 PETROLEUM CORPORATION	
3. Address of Operator 105 South 4th St., Artesia, NM 88210	
4. Well Location Unit Letter <u>G</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>East</u> Line Section <u>3</u> Township <u>16S</u> Range <u>35E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4007.5' 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: Perforate, Treat <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.

6-30-90. Acidized perforations 12356-12379' w/10000 gals 20% NEFE acid. Swabbed dry. Installed 1/4" postive choke for 3 hrs, 75 psi.

7-3-90. Perforated 11433-11613' w/16 - .50" holes as follows: 11433, 438, 439, 445, 446, 11450' (6 holes), 11579, 580, 581, 582, 11606, 608, 610, 611, 612 and 11613' (10 holes). Acidized perfs 11579-11613' w/2000 gals 20% NEFE acid. Swabbed to 11000'. Recovered 148 bbls. Black water and no oil, trace of gas.

7-7-90. Perforated 11016-11052' w/10 - .50" holes as follows: 11016, 017, 026, 032, 033, 034, 035, 050, 051, and 11052'. Treated perfs 11016-11052' w/1500 gals 20% NEFE acid. Swabbed well.

7-12-90. Reacidized perforations 11016-11052' (10 holes) w/10000 gals 20% NEFE acid.

7-17-90. Perforated Wolfcamp 10234-10475' w/29 .50" holes as follows: 10234, 235, 236, 237, 238, 239, 240, 243, 244, 245, 10447, 448, 449, 452, 453, 454, 455, 456, 460, 461, 462, 468, 469, 470, 471, 472, 473, 474 and 10475'. Treated perfs 10234-10245' w/1500 gal 20% NEFE. Trt'd perforations 10447-10475' w/5000 gals 20% NEFE acid. RBP set at 11500'.

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 7-24-90
TYPE OR PRINT NAME Juanita Goodlett TELEPHONE NO. 505/748-1471

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: