State of New Mexico Form C-103 Submit 3 Copies Appropriate
District Office ergy, Minerals and Natural Resources Departm Revised 1-1-89 DISTRICT I P.O. Box 1980, Hobbs, NM 88240 **OIL CONSERVATION DIVISION** WELL API NO. 310 Old Santa Fe Trail, Room 206 30 025 22529 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87503 5. Indicate Type of Lease FEE X STATE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. 017294 SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" EAST E K QUEEN (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: GAS WELL WELL X OTHER 2. Name of Operator 8. Well No. YARBROUGH OIL, L.P. #008 3. Address of Operator 9. Pool name or Wildcat P. O. BOX 1769 EUNICE, NM 88231 E-K OUEEN EAST Well Location : 1980 Feet From The NORTH 660 Line and \_ Feet From The <u>EAST</u> Line 22 18S Township hip 18S Range 34E

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 34E **NMPM** County Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT 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 CEMENT JOB OTHER: OTHER: 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. DATE - 6-2-97 PRESSURE - 520# WITNESSED - WINK # 4274 ft-TIME - 12:00 am

|                                                                                                                    |                | รู้รับ 3 คักคราว<br>คือแกร์อาศัยกุลกู | yal of Tem<br>E Expires | 11-210-2000    |
|--------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------|-------------------------|----------------|
| I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE (Green Agent) | ge and belief. | PARTNER                               |                         | DATE 7-15-97   |
| TYPE OR PRINT NAME PAUL PRATHER                                                                                    |                |                                       | TELETIONE NO.           | (505) 394 2545 |
| (This space for State Use)  ORIGINAL SIGNED BY                                                                     |                |                                       |                         | ¥0v ≥ s 1997   |
| APPROVED BY GARY WINK CONDITIONS OF APPROVAL IF ANY:  FIELD REP. II                                                | ти             | St                                    |                         | DATE           |