

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

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-31378

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
K-1860

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.)

7. Lease Name or Unit Agreement Name

Atlantic 32 State

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Harvey E. Yates Company

8. Well No.
#4

3. Address of Operator
P.O. Box 1933, Roswell N.M. 88202

9. Pool name or Wildcat
Buffalo Queen

4. Well Location
Unit Letter F : 1650 Feet From The North Line and 1650 Feet From The West Line
Section 32 Township 18S Range 33E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3745.5 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☒

OTHER: Spud & TD ☒

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.

Spudded 12 1/4" hole @ 9:15 am 9/13/91

9/13/91 Ran 12 jts 8 5/8" 32# csg; Set @ 411'
Cmtd w/400 sks Cl "C" w/2% CaCl
PD @ 7:00 am 9/14/91; Circ 98 sks to pit
WOC 12 hrs; Test csg 400#/30 min-Held ok

TD 7 7/8" hole @ 4560' 3:00 pm 9/18/91

19/19/91 Ran 105 jts 5 1/2" 17# csg; Set @ 4560'
Cmtd w/1650 sks 65/35 poz + 150 sks Cl "H"
PD @ 12:00 am 9/20/91; Did not circ; TOC @ 190'
RR @ 6:00 am 9/20/91

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

SIGNATURE Vickie Teel TITLE Production Analyst DATE 10/1/91

TYPE OR PRINT NAME Vickie Teel TELEPHONE NO. 623-6601

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: