

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I  
P. O. Box 1980 Hobbs, NM 88240

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

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

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

Well API NO.	30-025-31526
5. Indicate Type or Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	V-2252
7. Lease Name or Unit Agreement Name EKAY 27 STATE	
8. Well No.	#1
9. Pool name or Wildcat	SWD AIRSTRIP BONE SPRING

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 <input type="checkbox"/>	GAS <input type="checkbox"/>	SWD
	WELL	WELL	OTHER
2. Name of Operator	Harvey E. Yates Company		
3. Address of Operator	P.O. Box 1993, Roswell, NM 88202 1-505-623-6601		

4. Well Location  
Unit Letter M : 660' Feet From The SOUTH Line an 660' Feet From The WEST Line

Section	27	Township	18S	Range	34E	NMPM	LEA	County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)								
4012. 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"/>	REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	COMMENCE DRILLING OPNS.	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	CASING TEST AND CEMENT JOB	<input type="checkbox"/>
OTHER:	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>
PLUG AND ABANDON	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>	PLUG AND ABANDONMENT	<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

INJECTION PERFS: 9086'-9286' (OA)

TOC @ ? ( TOP INTERVAL LOGGED TO 2500')

100' PLUG FROM 9086' TO 8986' & TAG. OR CIBP @ 9040' PLUS 35' CMT.

100' PLUG @ 7860' ( TOP OF BONE SPRING)

100' PLUG @ 3500' ( ACROSS INTERM. SHOE @ 3450')

FREE POINT & CUT CASING (ATTEMPT TO RECOVER 1600' + CASING)

100' PLUG @ STUB; ( 50' IN & OUT OF CUT OFF) & TAG.

100' PLUG @ 550' ( ACROSS SURFACE SHOE @ 502')

10 SK SURFACE PLUG.

INSTALL DRY HOLE MARKER. CLEAN LOCATION, BACKFILL WORK PIT.

NOTE: CALL OCD I @ 1-505-393-6161 24 HOURS PRIOR TO COMMENCEMENT.

ABOVE APPROVED 3-21-96 1:45pm BY PAUL KAUTZ (OCD I) /RFN

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

SIGNATURE	<u>Ray F. Nokes</u>	TITLE	<u>PROD. MGR. / ENGINEER.</u>	Date	<u>3/29/96</u>
TYPE OR PRINT NAME	<u>RAY F. NOKES</u>	TELEPHONE NO.	<u>1-505 623-6601</u>		

(This space for State use)

Approved by	<u>Ray F. Nokes</u>	Title	<u>PROD. MGR. / ENGINEER.</u>	Date	<u>3/29/96</u>
Conditions of approval, if any:					