

Submit 3 Copies
to Appropriate
District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-103
Revised 1-1-89

| |
|---|
| WELL API NO. 30-025-31567-31526 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. V-2255 |
| 7. Lease Name or Unit Agreement Name EKey 27 State |
| 8. Well No. #1 |
| 9. Pool name or Wildcat 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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator Harvey E. Yates Company |
| 3. Address of Operator P.O. Box 1933, Roswell, N.M. 88202 | 4. Well Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 27 Township 18S Range 34E NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4012.7 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 type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| | OTHER: perf & acid jobs <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.

8/6/92 Set CIBP @ 9050'; Perf 5698-08' (oa)
8/7/92 Acdz w/2400 gals 10% SRA & 17 BS; Swab tested
8/11/92 Set RBP @ 5677'; Perf 5662-64' (oa)
Acadz w/2000 gals 20% NEFE & 10 BS; Swab tested
8/18/92 Release RBP & re-set @ 5590'; Perf 4865-67' (oa)
8/19/92 Acadz w/1000 gals 10% FE & 10 BS; Swab tested
8/20/92 RR & shut in for further evaluation

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

SIGNATURE V. Teel TITLE Drlg/Prod Analyst DATE 8/25/92
TYPE OR PRINT NAME TELEPHONE NO.

ORIGINAL SIGNED BY JERRY SEXTON
(This space for State Use) DISTRICT I SUPERVISOR

APPROVED BY _____ DATE AUG 27 '92

CONDITIONS OF APPROVAL, IF ANY: