District I PO Box 1980, Habbs, NM 88241-1980

State of New Mexico

Form C-104 Revised February 10, 1994

District II

Previous Operator Signature

Instructions on back NO Drawer DD, Artesia, NM 88211-0719 OIL CONSERVATION DIVISION Submit to Appropriate District Office District III PO Box 2088 Santa Fe, NM 87504-2088 5 Copies 1000 Rio Brazos Rd., Aztec, NM 87410 District IV AMENDED REPORT PO Box 2068, Santa Fe, NM 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT I. Operator name and Address <sup>1</sup> OGRID Number Yates Drilling Company 025513 105 South 4th Street Reason for Filing Code Artesia, NM 88210 CO <sup>4</sup> API Number ' Pool Name Pool Code 30 - 0 25 - 32678 Lusk, Yates, Seven Rivers 41859 Property Code Property Name ' Well Number 15705 Gecko Federal II. 10 Surface Location Ul or lot no. | Section Range Lot Ida Feet from the North/South Line | Feet from the East/West line County 19S 32E 1980 North 660 West Lea 11 Bottom Hole Location UL or lot no. Section Township Lot Ida Feet from the North/South line Feet from the East/West line County 12 Lae Code 12 Producing Method Code <sup>14</sup> Gas Connection Date 15 C-129 Permit Number 16 C-129 Effective Date 17 C-129 Expiration Date III. Oil and Gas Transporters Transporter OGRID 19 Transporter Name <sup>11</sup> POD 21 O/G 12 POD ULSTR Location and Description 34019 2813641 E-30-19S-32E Phillips 66 Company 0 P.O.Box 77
Rartlesville. OK 74005 IV. Produced Water " POD <sup>24</sup> POD ULSTR Location and Description Well Completion Data B Spud Date 14 Ready Date מד מ " PBTD " Perforations ™ Hole Size 11 Casing & Tubing Size 11 Depth Set <sup>33</sup> Sacks Cement VI. Well Test Data " Date New Oil <sup>16</sup> Gas Delivery Date 34 Test Date " Test Length и Tbg. Pressure " Cag. Pressure " Choke Size 4 Oil 4 Water 4 Gas " AOF "Test Method 46 I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION knowledge and belief. Signature: Approved by: Baren Karen J. Leishman Printed name: Title: Approval Date: Engineering Technician Date: Phone: 505-748-4500 1-20-98 If this is a change of operator fill in the OGRID number and name of the previous operator

Printed Name

Title

Date