

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

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

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

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

WELL API NO. 30-025-33745
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VO-4539
7. Lease Name or Unit Agreement Name Flint Unit
8. Well No. #3
9. Pool name or Wildcat Wildcat, Bone Spring
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3860

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: OR WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator Harvey E. Yates Company	
3. Address of Operator P.O. Box 1933, Roswell, N.M. 88202 505/623-6601	
4. Well Location Unit Letter <u>0</u> : <u>660</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line Section <u>31</u> Township <u>17S</u> Range <u>36E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3860	

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: <u>Spud & csg/cmt jobs</u> <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.

Spud well @ 10:00 pm 1/11/97

1/12/97 RD 17 1/2" hole @ 401'
Ran 8 jts 13 3/8" 48# ST&C H-40 csg; Set @ 410'
Cmt w/425 sks Cl "C" w/2% CaCl; PD @ 12:15 pm 1/12/97, Circ 20 sks to pit
WOC 12 hrs; Test csg to 500 psi/30 min, Held ok

1/19/97 TD 12 1/4" hole @ 3536'
Ran 79 jts 8 5/8" 32# ST&C J-55 csg; Set @ 3536'
Ctd w/1250 sks BJ lite + 300 sks Cl "C" w/2% CaCl
PD @ 6:00 pm 1/19/97, Circ 215 sks to pit
WOC 12 hrs, Test csg to 1500 psi/30 min, Held ok

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 1/23/97
TYPE OR PRINT NAME Vickie Teel 505/623-6601 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JAN 27 1997