State of New Mexico Submit 3 Copies Form C-103 Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-25443 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATEX FEE L 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. V-3551 SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: OIL. Northern AKQ State OTHER P&A - RE-ENTRY 152 15 2. Name of Operator 8. Well No. YATES PETROLEUM CORPORATION 3. Address of Operator 9. Pool name or Wildcat 105 South 4th St., Artesia, NM Rock Lake Bone Spring 4. Well Location 0 : 660 Feet From The \_ South Line and 1980 Feet From The East Line Township 22S 35E Range Lea **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3524' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: OTHER: 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. Plugged and abandoned well as follows:

10994-10850' w/70 sx Class H w/4/10% CF-14. Tag plug #1 @ 10860'. Plug #2 7600-7500' w/35 sx Class H Neat. Plug #3 6350-6250' w/35 sx Class H Neat. 4570-4320' w/200 sx Class Neat. Tag plug #4 @ 4268'. Plug #4 Plug #5 3025-2925' w/80 sx Class H Neat. 530-430' w/80 sx Class H Neat. Plug #6 25' to surface w/25 sx Class H Neat. Plug #7 Note: Displace with 25#/bbl salt gel mud between plugs. Set regulation abandonment marker. Work completed 3-26-92.

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

SIGNATURE Limite Deallie Title Production Supervisor DATE 3-31-92

TYPE OR FRINT NAME Juanita Goodlett Telephone no. 505/748-1471

(This space for State Use)

OIL & GAS INSPECTOR

OCT 22 1993

CONDITIONS OF APPROVAL, IF ANY: