| Survey 3 Copies To Appropriate District  | State of New<br>Energy, Minerals and N |                              | Form C-103 Revised June 10, 2003                         |
|--|--|------------------------------|--|
| 1 N. French Dr., Hobbs, NM 88240<br>District II  |  |                              | WELL API NO.<br>30-005-63410                             |
| 1301 W. Grand Ave., Artesia, NM 88210  | OIL CONSERVATION DIVISION              |                              | 5. Indicate Type of Lease                                |
| <u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Francis Dr.             |                              | STATE X FEE  |
| District IV  | Santa Fe, NM                           | 1 87505                      | 6. State Oil & Gas Lease No.                             |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   |  |                              |  |
|  | SC AND DEPODED ON WE                   | TIC                          | VO-5657  |
| (DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICAT  |  | R PLUG BACK TO A             | 7. Lease Name or Unit Agreement Name  Roulette AXR State |
| PROPOSALS.)  |  |                              | 8. Well Number   |
| 1. Type of Well: Oil Well Gas Well X   | Other                                  | RECEIVED                     | 1  |
| 2. Name of Operator  |  | TEOLIVED                     | 9. OGRID Number  |
| Yates Petroleum Corporation MAV 2 4 7004   |  | 025575                       |  |
| 3. Address of Operator   |  | 10. Pool name or Wildcat     |  |
| 105 S. 4 Succi, Artesia, Will 60210  |  | Wildcat Basement             |  |
| 4. Well Location   |  |                              |  |
|  |  |                              |  |
| Unit Letter E : 1775   | feet from the No                       | orth line and 7              | 88 feet from the West line                               |
| Section 8  | Township 10S                           | Range 26E                    | NMPM Chaves County                                       |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3779'GR   |  |                              |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |  |                              |  |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |  |                              |  |
|  | PLUG AND ABANDON                       | REMEDIAL WOR                 |  |
| TEMPORARILY ABANDON [] (   | CHANGE PLANS                           | COMMENCE DRI                 | ILLING OPNS. PLUG AND ABANDONMENT                        |
|  | MULTIPLE                               | CASING TEST A                |  |
| (  | COMPLETION                             | CEMENT JOB                   |  |
| OTHER:   | <u> </u>                               | OTHER: Surface               |  |
| 13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.                                 |  |                              |  |
| 5/11/04 – Resumed drilling at 3:00 AM. Set 9-5/8" 36# J-55 ST&C 8rd casing at 1125'. Cemented with 1100 sx 35/65 Poz "C" with additives. Tailed in with 200 sx "C" with additives. Tested casing to 1000 psi for 10 mins. Cement circulated to surface. WOC 26 hrs. Reduced hole to 8-3/4" and resumed drilling. |  |                              |  |
|  |  |                              |  |
|  |  |                              |  |
|  |  |                              | *  |
|  |  |                              |  |
|  |  |                              |  |
|  |  |                              |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.   |  |                              |  |
| SIGNATURE:   | TITLE                                  | : Regulatory Complian        | ce Supervisor DATE: May 21, 2004                         |
| Type or print name Tina Huerta   | E-ma                                   | nil address: <u>tinah@yr</u> | <u>ocnm.com</u> Telephone No. <u>505-748-1471</u>        |
| (This space for State use) MAY 3 1 2004  |  |                              |  |

\_DATE\_

APPPROVED BY FOR RECORDS ON TITLE Conditions of approval, if any: