(
Submit 3 Copies To Appropriate District Office		New Mexico	Form C-103
District I	Energy, Minerals	and Natural Resources	May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II			30-005-63704
1301 W. Grand Ave., Artesia, NM 88210		VATION DIVISION	5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE STEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM			
87505			VA-2091
	ICES AND REPORTS O		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPL			
PROPOSALS.)	CATION FOR FERMIT (FOR	dw e-101) for seen	Killer BEE State Com
1. Type of Well: Oil Well	Gas Well 🛛 Ot	ther RECEIVED	8. Well Number
2. Name of Operator			7 9. OGRID Number
Yates Petroleum Corporat	ion	DEC 2 0 2004	9. OGRID Number 025575
3. Address of Operator	1011	OUP:ARTERIA	10. Pool name or Wildcat
105 S. 4 th Street, Artesia,	NM 88210	1. And is to the first from it.	Undesignated Precambrian
4. Well Location			
Unit Letter M :	660 feet from the	South line and	660 feet from the West line
· · · · · · · · · · · · · · · · · · ·			
Section 32		10S Range 26E whether DR, RKB, RT, GR, etc.	NMPM Chaves County
A PART OF THE PART	11. Elevation (Snow w	neiner DR, RKB, R1, GR, etc., 3704'GR	
Pit or Below-grade Tank Application or Closure			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check	Appropriate Box to In	ndicate Nature of Notice,	Report or Other Data
NOTICE OF I	ATENTION TO	l CUD	CECUENT DEPORT OF
PERFORM REMEDIAL WORK	NTENTION TO:	I	SEQUENT REPORT OF:
TEMPORARILY ABANDON	PLUG AND ABANDOR CHANGE PLANS	N ☐ REMEDIAL WOR ☐ COMMENCE DRI	_
PULL OR ALTER CASING		CASING/CEMEN	
PULL OR ALTER CASING	MOLTIPLE COMPL	LI CASING/CEMEN	T JOB
OTHER:		☐ OTHER: Set cor	ductor 🖂
	pleted operations. (Clear		d 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.			
12/12/04 – Made 30'. Set 40' of 20	" conductor and cemente	d to surface.	
I hereby certify that the information	above is true and comple	ete to the best of my knowledg	e and belief. I further certify that any pit or below-
I hereby certify that the information grade tank has been/will be constructed q	above is true and compler closed according to NMOCD	ete to the best of my knowledg D guidelines □, a general permit □	e and belief. I further certify that any pit or belowor an (attached) alternative OCD-approved plan □.
grade tank has been/will be constructed q	r closed according to NMOCD) guidelines 🔲, a general permit 🔲	or an (attached) alternative OCD-approved plan 🗌.
grade tank has been/will be constructed q	r closed according to NMOCD) guidelines 🔲, a general permit 🔲	or an (attached) alternative OCD-approved plan 🗌.
grade tank has been/will be constructed of SIGNATURE	r closed according to NMOCE	oguidelines □, a general permit □ Regulatory Compliance Super	or an (attached) alternative OCD-approved plan visor DATE December 16, 2004
grade tank has been/will be constructed q	r closed according to NMOCE	oguidelines □, a general permit □ Regulatory Compliance Super	or an (attached) alternative OCD-approved plan 🗌.
SIGNATURE Type or print name Tina Hue	r closed according to NMOCE TITLE rta E-mai	O guidelines , a general permit Regulatory Compliance Super il address:	or an (attached) alternative OCD-approved plan visor DATE December 16, 2004 om Telephone No. 505-748-1471
SIGNATURE Type or print name Tina Hue For State Use Only	r closed according to NMOCE	O guidelines , a general permit Regulatory Compliance Super il address:	or an (attached) alternative OCD-approved plan visor DATE December 16, 2004 om Telephone No. 505-748-1471 DEC 2 0 2004
grade tank has been/will be constructed of SIGNATURE Type or print name Tina Hue	r closed according to NMOCE TITLE rta E-mai	O guidelines , a general permit Regulatory Compliance Super il address:	or an (attached) alternative OCD-approved plan visor DATE December 16, 2004 om Telephone No. 505-748-1471 DEC 2 0 2004