Emergy, Minerals and Natural Resources MESIA Previous June 10, 2003	Submit 3 Copies To Appropriate District Office	State of New Me		Form C-103			
District State Color State Color State S	District I	Energy, Minerals and Natu	ral Resources	Revised June 10, 2003			
1220 South St. Francis Dr. Santa Fe, NM 87505 SunDry Notices And Reports on Wells (DO NOT USE THIS FORM FOR PROPOSALS TO DABLE OR TO DEPEND REFLIG BACK TO A DIFFERENT HIS FORM FOR PROPOSALS TO DABLE OR TO DEPEND REFLIG BACK TO A DIFFERENT HIS FORM FOR PROPOSALS TO DABLE OR TO BE PROPORTION OF PROPOSALS TO DABLE OR TO BE PROPOSALS TO BE PROPOSALS TO DABLE OR TO BE PROPOSALS TO BE PROPOSALS TO DABLE OR TO BE PROPOSALS TO BE PR	District II	OII CONSERVATION	DIVISION	I I			
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2. Name of Operator Yates Petroleum Corporation JoN 0 1 7004 9. OGRID Number Yates Petroleum Corporation 10. Pool name or Wildcat 10. Pool name or Wildcat Morrow 4. Well Location Unit Letter D: 800 feet from the North line and 660 feet from the West line Section 14 Township 16S Range 26E NMPM Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3332 GL 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON SUBSEQUENT REPORT OF: PEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS ABANDONMENT COMMENCE DRILLING OPNS ABANDONMENT DPULL OR ALTER CASING MULTIPLE COMPLETION CASING TEST AND CHEMEN JOB OF ABANDONMENT OTHER: OTHER: Spud and surface casing Towns and surface dealing any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. 12/26/03 — Spudded well at 10:00 AM. Set 60° of 20° conductor. 12/23/030 — Set 13-3/8° 48¢ casing at 385′. Cemented with 440 sx Class "C" with additives. Cement circulated to surface. WOC. Reduced hole to 12-1/4" and resumed drilling. Thereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. Thereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. SIGNATURE: Area and complete to the best of my knowledge and belief. This space for State use)		Other REC	CEIVED		1		
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(This space for State use)	SIGNATURE: Jina Hu	TITLE: Reg	ulatory Compliance	Supervisor D	ATE: December	31, 2003	
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