Submit Copies To Appropriate District Office State of New Mexico			Form C-103		
District I French Dr. Hobbs, NM 38240			Revised March 25, 1999		
District II			WELL API NO. 30-015-31625		
811 South First, Artesia, NM 88210 District III 1000 Big Proces Rd Artesia, NM 88210 120 South St. Francis Dr.			5. Indicate Type of Lease		
1000 Rio Brazos Rd. Azteronim 87410 (11) South St. Francis Dr.			STATE FEE X		
1220 S. St. Francis Dr., Santasfe, NM _{CD} - NV 25/			6. State Oil & Gas Lease No.		
SUNDRY NOTICES AND SEPORTS ON WELLS					
(DO NOT USE THIS FORM FOR PROPOSALS TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPERCATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name: Louise AYI		
1. Type of Well:	_				
Oil Well Gas Well X Other					
Name of Operator Yates Petroleum Corporation			8. Well No.		
3. Address of Operator					
105 S. 4 th Street Artesia, NM 88210			9. Pool name or Wildcat Wildcat Morrow		
4. Well Location					
Unit Letter : 1859	feet from the South	line and 660 f	eet from the <u>East</u>	line	
Section 25	Township 21S Ran	ge 26E	NMPM Edo	dy County	
The second secon	10. Elevation (Show whether	DR, RKB, RT, GR, etc	$\frac{1}{c}$.)	y County	
	312	7' GR		PACE TO SERVICE AND ADMINISTRATION OF THE PACE TO SERVICE AND ADMINISTRA	4
11. Check A	ppropriate Box to Indicate	Nature of Notice,	Report or Other	Data	
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REI	PORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	K 🗌	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	ILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AI CEMENT JOB	ND		
OTHER:		OTHER: Set surf	ace casing		$\overline{\mathbf{x}}$
Describe proposed or completed op starting any proposed work). SEE I recompilation.	perations. (Clearly state all perting RULE 1103. For Multiple Comp	ent details, and give pletions: Attach wellb	pertinent dates, inclu ore diagram of prop	iding estimated date	of
2/27/03 – Resumed drilling at 8 2/28/03 – Ran 13-3/8" 48# H-4 Thixotropic with additives and circulated to surface. WOC 1	0 8R ST&C casing set at 602 304 sx BJ Lite with additive	: Tailed in with 20	10 sx "C" with add	ditives Comont	
I hereby certify that the information SIGNATURE	ſ				
	TITLE Regula	ory Compliance S			:
Type or print name / Jing Huerto (This space for State use)		-	Telephone No.	505-748-1471	
	CT II SUPERVISOR TITLE	Ą		MAR :	1120
Conditions of approval, if any:				_DATE	