Submit 3 Copies To Appropriate District Office	State of New Mexico	MAR 17 2009	Form C-103 June 19, 2008
Districtly (*) 1005 N. French Dr., Hobbs, NM 88240 District II	Energy, Minerals and Natural Resources	WELL API NO. 30-015-21667	Julie 19, 2008
1301 W: Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Le	
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE 6. State Oil & Gas Le	FEE 🔯
1220 S. St. Francis Dr , Santa Fe, NM 87505			
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR USE "APPL	TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Uni Yates Fee DT	t Agreement Name
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well Other P&A	8. Well Number 2	
2. Name of Operator Yates Petroleum Corporation		9. OGRID Number 025575	
3. Address of Operator 105 South Fourth Street, Artesia,	NM 88210	10. Pool name or Wile Eagle Creek; San And	
4. Well Location Unit Letter E:	1900 feet from the North line and	390 feet from the	West line
Section 13	Township 17S Range 25E		County
	11. Elevation (Show whether DR, RKB, RT, GR, 3477'GR	etc.)	
12. Check	Appropriate Box to Indicate Nature of Not	ice, Report or Other Dat	a
		UBSEQUENT REPO	
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON			「ERING CASING ☐ ND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	- I	MENT JOB	
OTHER:	OTHER:		
	pleted operations. (Clearly state all pertinent details york). SEE RULE 1103. For Multiple Completions		
	H with rods and tubing. Well on vacuum. Set a 4-1	/2 CIBP at 1320'. Pumped 5	0 bbls ahead. No
circulation. Spotted 40 sx cement.  3/11/09 – Tagged at 802'. Spotted 40 sx cement at 802'. PUH to 417'. Circulated 40 sx cement to surface. Cut off wellhead. Installed dry hole marker. WELL IS PLUGGED AND ABANDONED.			
dry note market. WEDE ISTER	GED AND ADAMBONED.		
			PNIERE
C. ID.	n: n l n l		MAR 1 8 2009
Spud Date:	Rig Release Date:		BY:16 Ams-let
I haraby cartify that the information	n above is true and complete to the best of my know	ladge and halief	
Thereby certify that the information	ratiove is the and complete to the best of my know	ledge and belief.	
SIGNATURE (Signature)	TITLE Regulatory Compli	ance Supervisor DATE	March 12, 2009
Type or print name Tina Hu For State Use Only	Liabil.tv under bond is r	etained pending receipt	575-748-4168
APPROVED BY: hot lus	of C-103 (Subsequent Rowhich may be found at C Forms, www.compredictate	OCD Web Page under	3/18/09
Conditions of Approval (if any):	eriate www.minitumorate	111111111111111111111111111111111111111	/ ///