Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 May 27, 2004	
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	30-045-32462
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210				of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	00 Pio Brazos Pd. Aztec NM 87410			FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas NMSF-0 07	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name VIERSEN FEDERAL	
1. Type of Well: Oil Well Gas Well X Other			1	3
2. Name of Operator YATES PETROLEUM CORPORATION			9. OGRID Number 25575	
3. Address of Operator 105 SOUTH 4TH STREET, ARTESIA, NM 88210			10. Pool name or FULCHER	Wildcat KUTZ PIC. CLIFFS
4. Well Location				
		SOUTH line and		n the <u>WEST</u> line
Section 19	Township 3	ON Range 13W nether DR, RKB, RT, GR, etc.	NMPM	County SAN JUAN
Pit or Below-grade Tank Application X or	5,648' GL			
Pit type Reserve Depth to Groundwa		rest fresh water well <u>~1.3 mi</u> Dis	tance from nearest surfa	ice water_~1914'
Pit Liner Thickness: mil	Below-Grade Tank: Vo	umebbls; C	onstruction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	TENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	☐ REMEDIAL WOF	ILLING OPNS.	PORT OF: ALTERING CASING PANDA
OTHER: RESERVE PIT 13. Describe proposed or completion of starting any proposed we or recompletion.		OTHER: v state all pertinent details, and for Multiple Completions: A		
			JAN 2005 DAN 2005	A STORY OF THE STO
I hereby certify that the information grade tank has been/will be constructed or	above is true and comple	e to the best of my knowledg	ge and belief. I further or an (attached) alterna	r certify that any pit or belowative OCD-approved plan □.
SIGNATURE Craig M. F	iehler	TITLE Biologist		DATE 12/30/04
Type or print name Craig M. For State Use Only	iehler	E-mail address: craig@permits	west. Com Tel	lephone No. 505- 466-8121 IAN - 4 2001
APPROVED BY: Conditions of Approval (if any)		TITLE CEPUTY OIL & GAS IN	SPECTOR, DIST. 🚱	DATE