Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103	
Office District I	Energy, Minerals and Natural Resources	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-33857	
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE	
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	 ,	o. State on & Gas Lease 110.	
87505	NOTE AND DEPONE ON WELLS		
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		7. Lease Name or Unit Agreement Name	
PROPOSALS.)	CATION FOR FERMIT (FORM C-101) FOR SUCH	Barrel BFK State Com	
1. Type of Well: Oil Well	Gas Well 🛛 Other	8. Well Number	
2. Name of Operator	RECEIVED	9. OGRID Number	
Yates Petroleum Corporat	ion	025575	
3. Address of Operator	FEB 0 3 2005	10. Pool name or Wildcat	
105 S. 4 th Street, Artesia,	NM 88210 OCUMANTES!	Chosa Draw Morrow	
4. Well Location			
Unit Letter D :	990 feet from the North line and	990 feet from the West line	
Section 16	Township 25S Range 26E	NMPM Eddy County	
Santon's Edition of the second section of the	11. Elevation (Show whether DR, RKB, RT, GR,		
And the second s	3368'GR		
Pit or Below-grade Tank Application	or Closure		
Pit type Depth to Groundwat	er 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 Indicate Nature of Notice, Report or Other Data			
NOTICE OF I	NTENTION TO: S	UBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	_		
TEMPORARILY ABANDON		DRILLING OPNS. ☐ PLUG AND ABANDON ☐	
PULL OR ALTER CASING	MULTIPLE COMPL	MENT JOB	
OTHER:	☐ OTHER: Spu	nd 🖂	
	pleted operations. (Clearly state all pertinent details		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
of feconipletion.			
1/31/05 – Spudded well at 1:30 PM. TD 10'. Hole size 12-1/4".			
I hereby certify that the information	a above is true and complete to the best of my know	ledge and belief. I further certify that any pit or below-	
	grade tank has been/will be constructed or closed according to NMOCD guidelines 🔲, a general permit 🔲 or an (attached) alternative OCD-approved plan 🔲.		
ALONA A II			
SIGNATURE	TITLE Regulatory Compliance	ce Supervisor DATE February 1, 2005	
Type or print name Tina Hue	E-mail address: tinah@ypcn	m.com Telephone No. 505-748-1471	
- , po or print name	DECORDS ONLY	**************************************	
I of blace out only	ML AIROS	-	
APPROVED BY:	TITLE	DATE	
Conditions of Approval (if any):			