Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 May 27, 2004	
District I 4625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-34553	
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM	o. State on & Gas Lease No.			140.
87505		VO-6699		
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit A	greement Name
(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			West DIT State	
PROPOSALS.)			Wyatt BHT State 8. Well Number	
1. Type of Well: Oil Well	of Well: Oil Well Gas Well Other		1	
2. Name of Operator	JAN Û Z 2008		9. OGRID Number	
	Yates Petroleum Corporation OCD-ANTESIA		025575	
3. Address of Operator	ress of Operator 105 S. 4 th Street, Artesia, NM 88210		10. Pool name or Wildcat Pierce Crossing; Bone Spring, East/Nash Draw; Delaware	
	NM 88210		Tierce Crossing, Bone Spring, Eas	Divasii Diaw, Delaware
4. Well Location	220 foot from the	North line and	2210 foot from the	East line
Unit Letter B:	feet from the	North line and		East line
Section 6		Range 30E		County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3165'GR				
Pit or Below-grade Tank Application or Closure				
Pit type Depth to Groundwater 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 INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDON				
PULL OR ALTER CASING	MULTIPLE COMPL [☐ CASING/CEMEN	T JOB 📙	
OTHER:	· [OTHER: DHC %	's	\boxtimes
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date				
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
Perforations 7138'-7224' were incorrectly reported Bone Spring on Form C-103 dated November 29, 2007, these perforations should be				
Delaware.				
WELL IS DOWNHOLE COMMINGLED BONE SPRING AND DELAWARE EFFECTIVE 11/2007				
DHC-3972				
Pierce Crossing; Bone Spring, East Oil-63% Gas-63% Water-63%				
Nash Draw; Delaware Oil-37% Gas-37% Water-37%				
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I hereby certify that the information above is true and complete to the best of my knowledge 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.				
SIGNATURE () TITLE Regulatory Compliance Supervisor DATE December 27, 2007				
Type or print name Tina Hue	rta E-mail ad	ldress: <u>tinah@ypcnm.c</u>	om Telephone No.	505-748-1471 AN 0 8 2008
For State Use Only APPROVED BY:	TI	TLE	DATE	
Conditions of Approval (APPROVED ONLY				