Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Revised June 10, 2003 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-005-63628 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe. NM 87505 6. State Oil & Gas Lease No. District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 VO-2925 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement 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 Trailblazer ANL State PROPOSALS.) 8. Well Number 1. Type of Well: RECEIVED Oil Well Gas Well X Other 2. Name of Operator 9. OGRID Number JAN 29 7004 Yates Petroleum Corporation 025575 3. Address of Operator OCD-ARTESIA 10. Pool name or Wildcat 105 S. 4<sup>th</sup> Street, Artesia, NM 88210 Undesignated Precambrian 4. Well Location Unit Letter A: 990 feet from the North line and 660 feet from the line Township 8S Range 27E NMPM Chaves 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3974'GR 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 **ABANDONMENT** PULL OR ALTER CASING **MULTIPLE** CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: Production casing 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. 1/22/04 - Reached TD 6890' at 7:30 PM. 1/26/04 - Set 5-1/2" 15.5# & 17# casing at 6890'. Cemented with 600 sx Pecos Valley Lite with additives. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE: Regulatory Compliance Supervisor DATE: January 28, 2004 Type or print name Tina Huerta E-mail address: tinah@ypcnm.com Telephone No. 505-748-1471 (This space for State use) DAJAN 3 0 2004 APPPROVED BY FOR RECORDS ONLY Conditions of approval, if any: