

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG-4429	

SUNDY NOTICES AND REPORTS ON WELLS & OFFICES
(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.)

OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>
Name of Operator Yates Petroleum Corporation		
Address of Operator 105 South Fourth Street - Artesia, NM 88210		
Location of Well UNIT LETTER <u>H</u> <u>1780'</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>9S</u> RANGE <u>26E</u> NMPM.		

7. Unit Agreement Name Desert Rose Unit
8. Farm or Lease Name
9. Well No. 1
10. Field and Pool, or Wildcat Pecos Slope Abo

15. Elevation (Show whether DF, RT, GR, etc.) 3824' GR	12. County Chaves
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

We plan to take this well to a TD of 6500' instead of 6100' as reported on our Sundry Notice dated August 11, 1987.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Les A. Clement TITLE Regulatory Secretary DATE August 19, 1987

Original Signed By
Les A. Clement

APPROVED BY Supervisor District 11

DATE AUG 26 1987

CONDITIONS OF APPROVAL, IF ANY: