				-	Ch	
Subinic 3 Copies To Appropriate District	State of New Mexico				Form C-103	
Office District I	Energy, Minerals and Natural Resources				Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
District II	OIL CONSERVATION DIVISION			30-015-32362		
811 South First, Artesia, NM 88210 District III	1220 South St. Francis Dr.			5. Indicate Type	of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410				STATE X FEE		
District IV	Santa Fe, NM 87505			6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505				E-10165		
	SUNDRY NOTICES AND REPORTS ON WELLS				r Unit Agreement Name:	
(DO NOT USE THIS FORM FOR PROPOS		0				
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				State AU State	e Com	
1. Type of Well:						
Oil Well Gas Well X	Other	А. 1.	A start			
2. Name of Operator				8. Well No.		
Yates Petroleum Corporation				2		
3. Address of Operator				9. Pool name or Wildcat		
105 S. 4 th Street Artesia, NM 88210				Undesignated	d Boyd Morrow	
				}		
4. Well Location						
Unit Letter <u>A</u> : 660 feet from the <u>North</u> line and <u>660</u> feet from the <u>East</u> line						
20	100	_	0.55			
Section 33	Township 18S		25E	NMPM Edd	dy County	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)						
		3539'		D		
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
NOTICE OF INTENTION TO:			SUE	SEQUENT RE		
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WOR	K LJ	ALTERING	
	CHANGE PLANS		COMMENCE DR		PLUG AND ABANDONMENT	
	MULTIPLE		CASING TEST A	ND		
	COMPLETION		CEMENT JOB			
OTHER:						
	(0) 1	<u> </u>	OTHER: Spud		X	

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 recompilation.

8/6/02 – Spudded with Butch's Rathole at 11:00 AM. Set 40' of 20" conductor pipe. Notified Van Barton with Artesia OCD of spud time.

I hereby certify that the information	above is true and complete to the best of my know	ledge and belief.
SIGNATURE June J	Hunta TITLE Regulatory Complia	nce Supervisor_DATE_August 9, 2002
Type or print name Ting Huer	ta Original signed by tim W. gum	Telephone No. 505-748-1471
(This space for State use)	DISTRICT II SUPERVISOR	AUG 2 6 2002
APPPROVED BY Conditions of approval, if any:	TITLE	DATE