State of New Mexico Form C-103 Submit 3 Copies ierals and Natural Resources Department Revised 1-1-89 Energy, to Appropriate District Office OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-015-25732 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE X STATE DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: OAS WELL APR 09 1997 Parish IV Com WELL X OTHER 8. Well No. 2. Name of Operator YATES PETROLEUM CORPORATION 9 Pool name or Wildcat 3. Address of Operator Dagger Draw Upper Penn, North 88210 105 South 4th St., Artesia, NM Well Location 1980 East South Line . 1980 Feet From The Unit Letter ____J__ I ine and Feet From The 19S 25E Eddy County **NMPM** Range Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3565' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. CHANGE PLANS **TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** X OTHER: OTHER: Meter Calibrations 12. 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. Yates Petroleum Corporation respectfully requests permission for meter calibrations to be done when total flow through meter has reached 6000 barrels between provings, but no less than once a year. Wells producing through battery are: Parish IV #1, Chamiza AJC #1, Parish IV #5 and the Ross EG Federal #9 nd complete to the best of my knowledge and belief. I hereby certify that the information above is true DATE April 4, 1997 Operations Technician

TYPEOR PRINT NAME

Rus ty Klein

THE PHONE NO. 30377432.

(This space for State Use CRICINAL SIGNED BY TIM W. GUM

DISTRICT II SUPERVISOR

APPROVED BY

TITLE

DATE

TELEPHONE NO. 505/748-1471

SIGNATURE -