Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION P.O. Box 2088

WELL API NO.

1.0.00200	30-015-21546
DISTRICT II Santa Fe, New Mexico 87504 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741)	6. State Oil & Gas Lease No. V-3576
SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PL DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	JG BACK TO A 7. Lease Name or Unit Agreement Name
1. Type of Well:	
OIL OAS WELL X OTHER	Aviette ALK State Com
2. Name of Operator YATES PETROLEUM CORPORATION	8. Well No.
3. Address of Operator	9. Pool name or Wildcat
105 South 4th St., Artesia, NM 88210	Burton Flat Strawn
4. Well Location	((0)
Unit Letter L: 1980 Feet From The South	Line and 660 Feet From The West Line
Section 17 Township 21S Range	27E NMPM Eddy County
10. Elevation (Show whether DF, RK.	<i>{////////////////////////////////////</i>
3214' GR	
11. Check Appropriate Box to Indicate Nature	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
ERFORM REMEDIAL WORK D PLUG AND ABANDON REM	EDIAL WORK ALTERING CASING
EMPORARILY ABANDON CHANGE PLANS COM	MENCE DRILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASI	NG TEST AND CEMENT JOB
	R: Correct well name
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give p	pertinent dates, including estimated date of starting any proposed
work) SEE RULE 1103.	ersuch tales, act and general tales of secting any proposed
Please correct well name as follows:	
FROM: Aviette ALK State #1	123456700
TO: Aviette ALK State Com #1	NOV 2007 To a
Correct Property Code: 25437	NOV OCT RECEIVED ARTESIA OF ARTESIA
<u> </u>	41819202122543F
I hereby certify that the information above a true and complete to the best of my knowledge and belief.	restricted Technician No. 1 2001
SIGNATURE TITLE O	perations Technician DATE Nov. 1, 2001
TYPEOR PRINT NAME Rusty Klein	TELEPHONE NO. 505/748-14
(This space for State Use)	
APPROVED BY TITLE —	DATE

APPROVED BY-