	- // Form C-103	
Submit 3 Copies To Appropriate District		
Office District I Energy, Ministals and Natural Resources	Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 8824	VELL API NO.	
District II 811 South First, Artesia, NM 88210	30-015-31830	
District III $\mathbb{R}$ RECEIVE 220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE	
District IV \o U(U - Arrise Santa ye, INVI 87505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM	V-4893	
SUNDRY NOTCES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name:	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Whonper A7D State	
PROPOSALS.) 1. Type of Well:	Whopper AZD State	
Oil Well Gas Well X Other		
2. Name of Operator	7. Well No.	
Yates Petroleum Corporation	#2	
3. Address of Operator	8. Pool name or Wildcat Wildcat Atoka	
105 S. 4 <sup>th</sup> Street Artesia, NM 88210	WIIdCat Afoka	
4. Well Location		
Unit Letter M: 990 feet from the South line and 990 feet from the West line		
Section 2 Township 22S Range 25E NMPM Eddy County-		
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3578' GR		
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
TEMPORARILY ABANDON		
PULL OR ALTER CASING MULTIPLE CASING TEST AN COMPLETION CEMENT JOB		
OTHER: OTHER: COTHER: Recom		
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.		
4/1/02 – MIRU pulling unit.		
4/3/02 – TIH with TCP guns to perforate Atoka 10,088-10,096' with 49 holes,	.42". Set packer at 10,008'.	
Drop bar and fire guns. Turn well to production.		
I hereby certify that the information above is true and complete to the best of my knowled	the and belief	
Thereby certify that the information above is the and complete to the best of hig knowled	age and ocner.	

SIGNATURE Min 2 - 11-4	TITLE Engineerin	g Technician DATE April 11, 2002
Type or print name Susan Her	pin	Telephone No. 505-748-1471
	RIGINAL SIGNED BY THE W. GUM INTRICT II SUPERVISORTLE	APR 17 202

APPPROVED BY Conditions of approval, if any:



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