Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised June 10, 2003
District L. 162 French Dr., Hobbs, NM 88240	Energy, witherars and Natural Resources	WELL API NO.
District II	OIL CONSERVATION DIVISION	30-005-63635
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE  6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	, , , , , , , , , , , , , , , , , , , ,	o. State on te das Lease 110.
	ES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSA	ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A .TION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)	•	Pinwheel BDP State  8. Well Number
1. Type of Well:	RECEIVED	2
Oil Well Gas Well X  2. Name of Operator	Other MAR 1 5 2004	9. OGRID Number
Yates Petroleum Corporation	OCD-ARTES	9. OGRID Number 025575
3. Address of Operator	_	10. Pool name or Wildcat
105 S. 4 <sup>th</sup> Street, Artesia, NM 8	88210	Wildcat Precambrian
4. Well Location		
Unit Letter A : 660	feet from the North line and	660 feet from the East line
Section36	Township 8S Range 25E	NMPM <u>Chaves</u> County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3644'GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INT	· = · · - · · · · · · · · · · · · · · ·	SUBSEQUENT REPORT OF:
·	PLUG AND ABANDON REMEDIAL V	
TEMPORARILY ABANDON	CHANGE PLANS   COMMENCE	DRILLING OPNS. PLUG AND ABANDONMENT
	MULTIPLE CASING TEST COMPLETION CEMENT JO	ST AND
OTHER:	☐ OTHER: Spi	ud X
13. 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 recompletion.		
3/7/04 – Spudded well at 10:30 AM. Set 40' of 16" conductor.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE:	TITLE: Regulatory Comp	pliance Supervisor DATE: March 10, 2004
Type or print name Tina Huerta	E-mail address: tinah@	ypcnm.com Telephone No. 505-748-1471
(This space for State use)	D-man address. tilianti	1 cicphone No. 303-/48-14/1
	DECADRE ANIX	
APPPROVED BY FOR Conditions of approval, if any:	RECORDS ONLYITLE	MAR <sup>E</sup> 1 6 2004