277	181920				5
Submit 3 Copies To Appropriate District 1 18 19 20 State of New Mexico Office District 1 Energy, Minerals and Natural Resources					Form C-103
Office District I Energy, Minerals and Natural Resources			Revised March 25, 1999		
1625 N. French Dr., Hobbs, N. 188240 District II ONL CONSERVATION DIVISION				WELL API NO.	
1625 N. French Dr., Hobbs, NN 188240 District II 811 South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV RECENTATION DIVISION RECENTATION DIVISION Santa Fe, NM 87505				30-015-32522	
District III 5 RECENTES 17 220 South St. Francis Dr.				5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 CD - ART Santa Fe NM 87505				STATE X FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, WM				6. State Oil & Gas Lease No.	
87505				V-1673	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:				7. Lease Name or Unit Agreement Name: Lost Tank AIS State	
Oil Well X Gas Well	Other				
2. Name of Operator				8. Well No.	
Yates Petroleum Corporation				10	
3. Address of Operator				9. Pool name or Wildcat	
105 S. 4 th Street Artesia, NM 88210				Undesignated Lost Tank Delaware	
A 337 11 7 4'					
4. Well Location					
Unit Latton 1 · 1450) fact from the Sout	h 1:		S+ S 11 \\/-	a+ 1·
Unit Letter <u>L: 1650</u>	<u> </u>	<u> </u>	ne and	leet from the <u>vve</u>	line
Section 36	Township 21S	Range	31E	NMPM Edd	C
Section 50	10. Elevation (Show whe				y County
	· ·	3549')	
11 Charle A				D O41 I	
NOTICE OF IN	ppropriate Box to Indic	ate Na	T		
NOTICE OF IN	TENTION TO:		SOB	SEQUENT REF	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WOR	K	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. ABANDONMENT		PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AI CEMENT JOB	ND	
OTHER:			OTHER: Set prod	-	X
Describe proposed or completed op starting any proposed work). SEE I recompilation.	perations. (Clearly state all RULE 1103. For Multiple C	pertiner Comple	nt details, and give tions: Attach wellb	pertinent dates, inclusione diagram of prop	iding estimated date of osed completion or
3/6/03 – Reached TD 8500' at 3/7/03 – Set 5-1/2" 15.5# & 17 Tailed in with 500 sx Thixset with Plus with additives. Cement of the second secon	# SB casing at 8500'. C h additives. Stage 2 wi	Cemen ith 450	nted Stage 1 with sx Interfill "C" no	n 500 sx Super "H' eat. Tailed in with	' with additives. n 100 sx Premium
I hereby certify that the information	above is true and complete	to the l	best of my knowled	lge and helief	
SIGNATURE 1	L			Supervisor_DATE	March 14, 2003
Type or print name Ting Huerto	2			Telephone No.	. 505-748-1471
	wal signed by the l rect ii supervisor				MAR 1 9 20
Conditions of approval, if any:	11	ITLE			_DATEDATE