

Submit To: Appropriate District Office State Lease - 6 copies F- Lease - 5 copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> Revised June 10, 2003  WELL API NO. 30-015-31582  5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>  State Oil & Gas Lease No. V-4804																																												
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>																																														
1a. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>  b. Type of Completion: NEW <input type="checkbox"/> WORK <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF. <input type="checkbox"/> WELL OVER BACK RESVR.		<div style="text-align: center;"> <b>RECEIVED</b>   <b>DEC - 1 2003</b>   <b>OCD-ARTESIA</b>  <b>RECOMPLETION</b> </div> 7. Lease Name or Unit Agreement Name  Tracy AXW State																																												
2. Name of Operator Yates Petroleum Corporation		8. Well No. 1																																												
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210 (505) 748-1471		9. Pool name or Wildcat Happy Valley Strawn Northeast																																												
4. Well Location  <table style="width:100%;"> <tr> <td>Surface</td> <td>Unit Letter</td> <td>I</td> <td>:</td> <td>1650</td> <td>Feet From The</td> <td>South</td> <td>Line and</td> <td>660</td> <td>Feet From The</td> <td>East</td> <td>Line</td> </tr> <tr> <td>Bottomhole</td> <td>Unit Letter</td> <td>A</td> <td>:</td> <td>868</td> <td>Feet From The</td> <td>North</td> <td>Line and</td> <td>842</td> <td>Feet From The</td> <td>East</td> <td>Line</td> </tr> </table> <table style="width:100%; margin-top: 5px;"> <tr> <td>Surface</td> <td>Section</td> <td>25</td> <td>Township</td> <td>21S</td> <td>Range</td> <td>26E</td> <td>NMPM</td> <td>Eddy</td> <td>County</td> </tr> <tr> <td>Bottomhole</td> <td>Section</td> <td>36</td> <td>Township</td> <td>21S</td> <td>Range</td> <td>26E</td> <td>NMPM</td> <td>Eddy</td> <td>County</td> </tr> </table>			Surface	Unit Letter	I	:	1650	Feet From The	South	Line and	660	Feet From The	East	Line	Bottomhole	Unit Letter	A	:	868	Feet From The	North	Line and	842	Feet From The	East	Line	Surface	Section	25	Township	21S	Range	26E	NMPM	Eddy	County	Bottomhole	Section	36	Township	21S	Range	26E	NMPM	Eddy	County
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10. Date Spudded 10/9/03 RC	11. Date T.D. Reached NA	12. Date Compl. (Ready to Prod.)	13. Elevations (DF& RKB, RT, GR, etc.) 3127'GR 3145'KB	14. Elev. Casinghead																																										
15. Total Depth 12,100'	16. Plug Back T.D. 10,700'	17. If Multiple Compl. How Many Zones?	18. Intervals Drilled By Rotary Tools Pulling Unit	Cable Tools																																										
19. Producing Interval(s), of this completion - Top, Bottom, Name 10,500'-10,636' Strawn				20. Was Directional Survey Made No																																										
21. Type Electric and Other Logs Run NA				22. Was Well Cored No																																										
<b>23. CASING RECORD (Report all strings set in well)</b>																																														
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD																																										
REFER TO ORIGINAL COMPLETION																																														
24. LINER RECORD																																														
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN																																										
26. Perforation record (interval, size, and number)			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.																																											
10,500'-10,504' (9)			DEPTH INTERVAL																																											
10,624'-10,636' (25)			AMOUNT AND KIND MATERIAL USED																																											
			10,500'-10,636' Acidize w/3000g 15% IC acid and 70 balls																																											
			Re-acidize w/2000g 15% IC acid and 60 balls																																											
			10,550'-10,636' Acidize w/25,000g 17% acid																																											
28. PRODUCTION																																														
Date First Production 10/29/03		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing		Well Status (Prod. or Shut-in) Producing																																										
Date of Test 11/12/03	Hours Tested 24 hrs	Choke Size NA	Prod'n For Test Period	Oil - Bbl 0																																										
			Gas - MCF 161	Water - Bbl. 0																																										
				Gas - Oil Ratio NA																																										
Flow Tubing Press. 90 psi	Casing Pressure 1480 psi	Calculated 24-Hour Rate	Oil - Bbl. 0	Gas - MCF 161																																										
			Water - Bbl. 0	Oil Gravity - API - (Corr.) NA																																										
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold				Test Witnessed By Blaine Wallace																																										
30. List Attachments None																																														
31. I hereby certify that the information shown on both sides of this form as true and complete to the best of my knowledge and belief																																														
Signature		Printed Name Tina Huerta Title Regulatory Compliance Supervisor Date November 25, 2003																																												
E-mail Address: tinah@vpcnm.com																																														

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn. "B
T. Salt	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C
B. Salt	T. Atoka	T. Pictured Cliffs	T. Penn. "D
T. Yates	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	T. Devonian	T. Menefee	T. Madison
T. Queen	T. Siluro-Devonian	T. Point Lookout	T. Elbert
T. Grayburg	T. Montoya	T. Mancos	T. McCracken
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Otzte
T. Glorieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	
T. Blinebry	T. Gr. Wash	T. Morrison	
T. Tubb	T. Delaware Sand	T. Todilto	
T. Drinkard	T. Bone Springs	T. Entrada	
T. Abo	T. Penrose	T. Wingate	
T. Wolfcamp	T. PreCambrian	T. Chinle	
T. Penn		T. Permian	
T. Cisco (Bough C)		T. Penn "A	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 3, from.....to.....

No. 2, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology
			<b>REFER TO ORIGINAL COMPLETION</b>