Submit 3 Copies To Appropriate District Office		State of New Mexico		Form C-103 May 27, 2004	
<u>District I</u> 1625 N. French Dr , Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.		
<u>District II</u> 1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-35208		
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE	FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease		
1220 S St. Francis Dr., Santa Fe, NM 87505			o. Blate of & Gas Bease	110.	
SUNDRY NOTIC	ES AND REPORTS ON WELI	LS	7. Lease Name or Unit A	greement Name	
DIFFERENT RESERVOIR. USE "APPLICA	TLS TO DRILL OR TO DEEPEN OR PLUG BACK TO A NTION FOR PERMIT" (FORM C-101) FOR SUCH		Behike BKE State Com		
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🛛 Other	0014 2			
Name of Operator Yates Petroleum Corporation	1	OCD-AR	9. OGRID Number 025575		
3. Address of Operator	/		10. Pool name or Wildcat		
105 S. 4 th Street, Artesia, NM 88210			Wildcat Morrow		
4. Well Location Unit Letter P: 6	60 feet from the Sou	th line and	660 feet from the	East line	
Section 27		lange 27E		County	
12222575	11. Elevation (Show whether D	R, RKB, RT, GR, etc., 5°GR	31 41	網製制	
Pit or Below-grade Tank Application or					
Pit type Depth to Groundwater				r	
Pit Liner Thickness: mil		*	nstruction Material	** *! . *!»	
12. Check Ap	opropriate Box to Indicate	Nature of Notice,	Report or Other Data		
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT	OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR		ING CASING	
	CHANGE PLANS	COMMENCE DRI		ND ABANDON 🗌	
PULL OR ALTER CASING	MOLTIPLE COMPL	CASING/CEMENT	「JOB L」		
OTHER:		OTHER: 5' new h			
 Describe proposed or comple of starting any proposed work or recompletion. 	ted operations. (Clearly state alk). SEE RULE 1103. For Mult				
-					
5/22/07 - TD 70'. Made 5' new hole a	at 3:30 PM. Hole size 18".				
•					
hereby certify that the information abrade tank has been/will be constructed or cl	oove is true and complete to the osed according to NMOCD guidelines	best of my knowledge , , a general permit	e and belief. I further certify to or an (attached) alternative OCI	that any pit or below D-approved plan □.	
SIGNATURE CANALLY	urta TITLE Regulat	ory Compliance Supe	rvisor DATE June 2	25, 2007	
Type or print name Tina Huerta	E-mail address	tinah@ypcnm.co	Telephone No.	505-748-1471 JUN 2 8 200	
For State Use Only	CORDS ONLY TITLE				
APPROVED BY: FOR REC	TITLE_		DATE		
onomons of Approval (II any):					