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## FEB 15 2008 OCD-ARTESIA

Submit 2 Copies To Appropriate District	State of New Mexico	SE THIS IESIA	Form C-103
Office District I	Energy, Minerals and Natural Resources		October 25, 2007
1625 N French Dr., Hobbs, NM 88240		WELL API NO.	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015	-10828
District III	1220 South St. Francis Dr.	5. Indicate Type of L	
1000 Rio Brazos Rd, Aztec. NM 87410	Santa Fe, NM 87505	STATE X	FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Pe, INIVI 67303	6. State Oil & Gas L	
87505		E-101	65
	ES AND REPORTS ON WELLS	7 Lease Name or Un	nit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSA	LS TO DRILL OR TO DEEPEN OR BLICKERS TO A R TION FOR PERMIT" (FORM C-TOT) FOR SOCIETOR R	FCOPD	
PROPOSALS.)	TION FOR PERMIT" (FORM C-101) FOR SOCIE-	Jiare	AU
1. Type of Well Oil Well G	Gas Well 🔽 Other PA	8. Well Number #	/
2. Name of Operator	FF9 1 8 2003	9. OGRID Number	<u></u>
Yates Petroleum Cor	poration	025575	·
3. Address of Operator	Cierry Guya Donner Di 11	Inspector Pool name or Wi	Ideat
105 S. 4th Street, A	N/A// 1/212 T2	RTISIA CO OCONS	in Andres Wes
4. Well Location		" (/iQJC) Pram	at many yes
	feet from the // line and 330 feet from the	e 🕍 line	
	-	Eddy	
	11. Elevation (Show whether DR, RKB, RT, GR, e		
	11. Dicyadon (Bhow whether DR, 100), K1, OR, e	10.)	
12 Check Appropriate Box to	Indicate Nature of Notice, Report or Othe	r Data	CONTRACTOR SAMPLES OF THE STATE
12. Check repropriate box to	mulcute i vatare of i votice, report or othe	n Dutu	
NOTICE OF INT	ENTION TO: SI	JBSEQUENT REPO	RT OF:
Ī	PLUG AND ABANDON REMEDIAL W		TERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE I	DRILLING OPNS.□ P	AND A
PULL OR ALTER CASING	MULTIPLE COMPL   CASING/CEMI	ENT JOB 🗌	
	_  _		
OTHER ·		s ready for OCD inspecti	
	compliance with OCD rules and the terms of the C		osure plan.
	ed and leveled. Cathodic protection holes have be		
A steel marker at least 4 in diame	eter and at least 4' above ground level has been se	et in concrete. It shows the	,
OPERATOR NAME LEAS	SE NAME, WELL NUMBER, API NUMBER,	OHARTER/OHARTER	LOCATION OR
	, TOWNSHIP, AND RANGE. All INFORMA		
	ED ON THE MARKER'S SURFACE.	TION III DEBIT WEE	,
The location has been leveled as n	nearly as possible to original ground contour and l	nas been cleared of all junk	t, trash, flow lines and
other production equipment.			
	d risers have been cut off at least two feet below g		
	emaining well on lease, the battery and pit location		
from lease and well location.	or's pit permit and closure plan. All flow lines, p	roduction equipment and j	unk have been remove
	have been removed. Portable bases have been re	amoved (Poured oncite con	acrata basas da not bay
to be removed )	have been removed. Tottable bases have been re	moved. (1 oured onsite cor	icrete bases do not hav
	have been addressed as per OCD rules.		•
	n abandoned in accordance with 19.15.9.714.B(4)	(b) NMAC All fluids hav	e been removed from
non-retrieved flow lines and pipelines.		(0) 1 11/11/20, 1 14/1 14/14/16/16/1	
	·		
When all work has been completed, ret	turn this form to the appropriate District office to	schedule an inspection. If	more than one
	cation because it does not meet the criteria above,		
1 1 17	A		
SIGNATURE Chill	TITLE Forcing	DA	TE >-13-08
TYPE OF PRINT NAME 1 - 1	As land EMAIL LAND 1	m . O . Ava DUC	NIGETE 7/0 1/71
For State Use Only	Lichards E-MAIL: Irichards	Cypenmicon PHC	11471–347–1471