Submit 3 Copies To Appropriate District Office <u>District I</u>	State of New Mexico Energy, Minerals and Natural Resources			WELL API N	Form C-103 Revised June 10, 2003
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	OIL CONSERVATION I 1220 South St. Franc Santa Fe, NM 875		icis Dr.	5. Indicate T	30-015-33174 Type of Lease
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.) 1. Type of Well:	JG BACK TO A OR SUCH		ne or Unit Agreement Name val BDQ State Com lber		
Oil Well Gas Well X 2. Name of Operator	Other		RECEIVED	9. OGRID N	umher
Yates Petroleum Corporation			FFR 2 8 2004	9. OGKID N	025575
3. Address of Operator 105 S. 4 th Street, Artesia, NM	. Address of Operator 105 S. 4 th Street, Artesia, NM 88210			10. Pool name or Wildcat Chester	
4. Well Location					
Unit Letter F : 20	90 feet from the	North	line and10	993 feet fro	om the West line
Section 32	Township	20S Ra	nge <u>23E</u>	NMPM	Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4415'GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					REPORT OF: ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB	ID [
OTHER:		П	OTHER: 5' new h	nole	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.					
2/19/04 - TD 15'. Hole size 12-1/4". Made 5' new hole at 1:30 PM.					
Y1	 				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE: Jina He	urta	TITLE: Re	gulatory Compliano	e Supervisor	DATE: February 20, 2004
Type or print name Tina Huerta		E-mail a	ddress: tinah@ypcn	m.com	Telephone No. 505-748-1471
(This space for State use)	ine neade	~ nn 4 ≥			FEB 2 4 2004
APPPROVED BY Conditions of approval, if any:	FOR RECORDS	TITLE_			DATE