				- 6155	
Submit 3 Copies To Appropriate District Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	State of New Mexico Energy, Minerals and Natural Resources			WELL API NO.	Form C-103 Revised March 25, 1999
District II 81! South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Septe Fo. NM 87505			30-005-63233 5. Indicate Type of STATE	FEE
Santa Fe, NM 87505 Sistrict IV Santa Fe, NM 87505				6. State Oil & G LG-2462	
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: Oil Well Gas Well X Other				7. Lease Name or Unit Agreement Name: Conejo RH State	
2. Name of Operator Yates Petroleum Corporation				7. Well No. #5	
3. Address of Operator 105 S. 4 th Street Artesia, NM 88210				8. Pool name or Wildcat Undesignated Penn	
4. Well Location Unit Letter F: 1500 Section 2				from the West NMPM Chave	line
Section 2	Township 7S 10. Elevation (Show w		R, RKB, RT, GR, e		es County
3758' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
				SEQUENT REI	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AND CEMENT JOB		
OTHER:			OTHER: Frac		X
Describe proposed or completed opstarting any proposed work). SEE Frecompilation. 7/3/00 – MI and RU. 7/5/00 – Frac Penn perfs 4944- 7/6-7/11/00 – Flow back frac. 7/12/00 – Turn well over to pro-	RULE 1103. For Multiple	e Comple Is WF 13	tions: Attach well	bore diagram of prop	osed completion or
					RECEIVEL DOD ARTERIA
I hereby certify that the information	above is true and compl	ete to the	best of my knowle	edge and belief.	· · · · · · · · · · · · · · · · · · ·
SIGNATURE Mora U	uftitl	.E <u>E</u>	ngineering Ted	chnician DATE	<u>September 10, 2001</u>
Type or print name Susan He	rpin			Telephone	No. 505-748-1471
(This space for State use) APPPROVED BY Conditions of approval, if any:	SINAL SIGNED BY TIN RICT II SUPERVISOR	A W. GU	M		SEP 1 3 2001