(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) 1. Type of Well: Oil Well Gas Well X 2. Name of Operator Yates Petroleum Corpor 3. Address of Operator	ATION FOR PERMIT" (FORM Other	nd Natu ATION St. Fran NM 87 WELLS	ral Resources DIVISION ncis Dr. 7505 UG BACK TO A DR SUCH	7. Well No. #2 8. Pool name or Undesigno	X FEE as Lease No. Unit Agreement Name: State Wildcat uted Foor Ranch
4. Well Location				Pre-Permi	an
Unit Letter K: 1980' feet from the South line and 1500 feet from the West line					
Section 21		ange		MPM Chave	es County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)					
3758' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF IN	FENTION TO:	Cate IV		SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WOR		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS TO PLUG AND		
PULL OR ALTER CASING	MULTIPLE		CASING TEST AND		
OTUEN .			OTHER: set prod	uction casing	
Describe proposed or completed op	erations. (Clearly state all	pertine	OTHER: set prod		uding estimated date of
starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. 4/10/01 – Ran 151 jts. (6205.84') casing set at 6200' as follows: 48 jts. 5-1/2" 15.5# SB (1990.65') 103 jts. 5-1/2" 15.5# varn (4215.19') Float shoe set at 6200'. Float collar set at 6155.31'. Bottom marker set at 5121.03'. Cemented with 500 sxs Pecos Valley Lite with 1 pps D44 + 4 pps D42 + .2% D65 +.3% D167 + .2% D46 + .15% D13 (yld 1.42, wt 13). PD at 7:00 PM. Bumped plug to 1930 psi, held OK. Notified Artesia OCD (Mike Stubblefield) of operations. Rig released at 12:00 Midnight.					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE Marie Vi	T	ITLE .	Engineering	lechnician DA	ATE <u>October 4, 2001</u>
Type or print name Susan Herpin Telephone No. 505-748-1471					
(This space for State use)	ORIGINAL SIGNED BY		. GUM		
APPPROVED BY	DISTRICT II SUPERVIS				DA ACT 0 7 2001

Conditions of approval, if any: