Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources			Form C-103 May 27, 2004				
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.						
District II	OIL CONSERV	30-025-36621						
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.			5. Indicate Type of Lease  STATE FEE				
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505					FEE   Pe No.		
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	0 S. St. Francis Dr., Santa Fe, NM				6. State Oil & Gas Lease No. VO-5942			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name or Unit Agreement Name				
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				Statler State Unit				
1. Type of Well: Oil Well Gas Well Other				8. Well N	1	,		
Name of Operator     Yates Petroleum Corporation				9. OGRID Number 025575				
3. Address of Operator				10. Pool name or Wildcat				
105 S. 4 <sup>th</sup> Street, Artesia, NM 88210				Mississippian				
4. Well Location								
Unit Letter N:	660 feet from the	South		<del></del>	et from the	West	line	
Section 34		11S Rar		NMPM	Lea	County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4126' GR								
Pit or Below-grade Tank Application	or Closure 🗌	7120	<u>GR</u>				J. 64 ** 4.5	
Pit type Depth to Groundwat	er Distance from nea	arest fresh wa	iter well Dis	stance from nea	arest surface wa	ter		
Pit Liner Thickness: mi				onstruction Ma	•			
12 Check	Appropriate Box to It	ndicate N	ature of Notice	Report or	Other Data			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data								
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:								
PERFORM REMEDIAL WORK			REMEDIAL WOR		<del></del>	RING CASI	NG []	
TEMPORARILY ABANDON  PULL OR ALTER CASING			COMMENCE DR		S. PAN	DA	Ш	
FOLE ON ALTEN CASING	, WOLTH LE COMI L	니	OAOII 10/OEIVIEI1	1 000				
OTHER:			OTHER:	Production			🗵	
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.								
or recompletion.								
<b>8-16-04</b> TD 8-3/4" hole to 13416' @ 10:15 p.m. Set 5-1/2" 17# casing @ 13416'. Cemented w/1620 sx 35:65 POZ H w/additives and								
<b>8-16-04</b> TD 8-3/4" hole to 13416' tailed in w/1745 sx 61:15:11 C. To		17# casing	@ 13416'. Cemer	ited w/1620	sx 35:65 POZ	H w/additi	ves and	
taned in w/1/43 SX 01.13.11 C. 10	C calculated to 3900.							
34567897077								
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed on closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.								
SIGNATURE Storm.	Dains	_TITLE <u> </u>	Regulatory Complia	ance Technic	ian DA	TE <u>8-24-</u>	04	
Tyme or mint mane	D	الله الله		TAFF MAN	Nombers Me	505 740	1.471	
Type or print name Stormi D  For State Use Only	A E-ma	ail address:	- THE W	<u> 5/hi. 16</u>	elephone No.	<u> 303-748-</u>	14/1	
<u> </u>	1,17/4	فينست	PRESENTATI		- معملات المسلمات ال   <b>  1                                  </b>	G 9 77 01	201	
APPROVED BY: Conditions of Approval (if any):	) Wink 0	CIENTO KI	Regulatory Complia		DAY	性 <u>~ ( ZI</u>	004	
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