Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO.
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-36984 5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE STATE FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPE	CICES AND REPORTS ON WELLS DISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH  Gas Well   Other	7. Lease Name or Unit Agreement Name  East Sand Springs BGD State Com  8. Well Number
		8
2. Name of Operator Yates Petroleum Corporat	ion	9. OGRID Number 025575
3. Address of Operator		10. Pool name or Wildcat
105 S. 4 <sup>th</sup> Street, Artesia, NM 88210		Sand Springs; Mississippian (Gas)
4. Well Location		
Unit Letter F :	1650 feet from the North line and	1980 feet from the West line
Section 34	Township 10S Range 34E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
4196' GR		
Pit or Below-grade Tank Application or Closure		
	er Distance from nearest fresh water well D	
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK		
TEMPORARILY ABANDON	<del>_</del>	RILLING OPNS. P&A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	NT JOB □
OTHER:	CTUED.	Datilia a
OTHER: Drilling   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.		
<b>3-10-05</b> Made 5' of new hole. TD	=35'. Hole size=12-1/4". Notified Sylvia Dickey w/H	obbs NMOCD via voice mail.
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		heur!VED
		Hobbs OCD
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Lhereby certify that the information	above is true and complete to the best of my browled	re and helief I found
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 of closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.		
0	\ ~	-
SIGNATURE Down	TITLE Regulatory Compli	ance Technician DATE 3-14-05
Type or print name Stormi D	avis E-mail address: stormid@ypcnn	n.com Telephone No505-748-1471
For State Use Only		1010phone 110
APPROVED RV.	OC TIELD REPRESENTATI	VETIZSTAFF MANAGEMENTE MAR 16 200

APPROVED BY: Conditions of Approval (if any):