Submit 3 Copies To Appropriate District	Ct. (CNI NA	• •		E 0.100
Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resources		WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-025-37096	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE	
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM			V-5910	
87505 SLINDRY NOTIC	ES AND REPORTS ON WELL	9	7. Lease Name or Un	it Agraement Name
(DO NOT USE THIS FORM FOR PROPOSA			7. Lease Name of On	it Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Chesney State Unit	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number	Juite Cint
			1	1
2. Name of Operator			9. OGRID Number	
Yates Petroleum Corporation	1		025	
3. Address of Operator 105 S. 4 th Street, Artesia, NM 88210			10. Pool name or Wildcat	
	M 88210		Dempster Mill	, Mississippian
4. Well Location				
Unit Letter E : 16	feet from the North	th line and	990 feet from the	West line
Section 26	Township 11S R	ange 35E	NMPM Lea	County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
		3' GR	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Pit or Below-grade Tank Application or				
Pit type Depth to Groundwater _	Distance from nearest fresh	water well Dis	tance from nearest surface v	vater
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Co	nstruction Material	
12. Check Ar	opropriate Box to Indicate N	Nature of Notice	Report or Other Dat	a
			report of outer Da	
NOTICE OF INT	– –	SUB	SEQUENT REPO	RT OF:
	PLUG AND ABANDON	REMEDIAL WOR		TERING CASING 🗌
	CHANGE PLANS	COMMENCE DRI		. A 🗆
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	ΓJOB □	
OTHER:		OTHER:	Spud	∇
13. Describe proposed or comple	ted operations. (Clearly state all	pertinent details and	l give nertinent dates in	cluding estimated date
of starting any proposed work	k). SEE RULE 1103. For Multip	ple Completions: At	tach wellbore diagram o	f proposed completion
or recompletion.	•			- FF compression
4-1-05 Spudded well. TD=10'. Hole	size=12-1/4" Notified Sylvia T	ickey w/Hobbs NM(OCD vio amail	297 marin 18 m
To appear with 12 to . Hote	one 12 1/4 . Induited byttla E	rickey willows inivit	OCD via eman.	3031 1234
			25.25 42.52.52 42.52.52 42.52.52 42.52.52 42.52.52 42.52.52 42.52.52 42.52.52 42.52	"S"
				0 7 0
			Ž.	6 ,
			1,7	3101112
			42	Co 600 77
			183	***/
				505 ET 81 TT 81 CT 191
Thomshor and Could be desired to the				
I hereby certify that the information ab grade tank has been/will be constructed or ck	ove is true and complete to the b	est of my knowledge	and belief. I further cer	tify that any pit or below-
O .	Bed according to MAOCD guidennes	□, a generai permit □ (or an (attached) alternative	OCD-approved plan ∐.
SIGNATURE STATE	TITLE :	Regulatory Complian	nce Technician D	ATE <u>4-5-05</u>
	•			
Type or print name Stormi Davis	E-mail address	:stormid@ypcn	m.com Telephone No	o. <u>505-748-1471</u>
For State Use Only				
APPROVED BY: OC. FIELD REPRESENTATIVE MYSTAFF MANAGEMENT THE PROPERTY OF THE				
Conditions of Approval (if any):	- WWK_HILE_		DA	
			A	IPR 0 7 2005
•				