Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Reso	Form C-103 May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	OIL CONSERVATION DIVIS 1220 South St. Francis Dr. Santa Fe, NM 87505	20.025.27117
SUNDRY NOTI (DO NOT USE THIS FORM FOR PROPOSITION OF THE PROPOSALS.)	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK CATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Other	7. Lease Name or Unit Agreement Name Paisley BGS State Com 8. Well Number
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation 3. Address of Operator 105 S. 4 th Street, Artesia, N		10. Pool name or Wildcat Wildcat Mississippian (Gas)
4. Well Location Unit Letter P: 990 feet from the South line and 990 feet from the East line		
Section 6 Township 10S Range 34E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4249' GR		
Pit or Below-grade Tank Application or Closure Pit type Depth to Groundwater Distance from nearest fresh water well Distance from hearest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material		
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Construction Material
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING OTHER: 13. Describe proposed or comp of starting any proposed wo or recompletion.	PLUG AND ABANDON REMEI CHANGE PLANS COMM MULTIPLE COMPL CASIN OTHER leted operations. (Clearly state all pertinent ork). SEE RULE 1103. For Multiple Comp	SUBSECUENT REPORT OF DIAL WORK ALTERING CASING DIAL WORK ALTERING CASING DIAL WORK PAS DIAL P&A DIAL PAS DIAL P
4-3-05 TD 17-1/2" hole to 418'. Set 13-3/8" 48# casing @ 418'. Cemented w/220 sx Premium Plus w/additives and tailed in w/200 sx. Cement circulated. WOC. Tested casing to 600#. WOC 25 hrs, 30 min. Reduced hole to 12-1/4" and resumed drilling.		
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 or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan . SIGNATURE TITLE Regulatory Compliance Technician DATE 4-6-05		
Type or print name Stormi Da For State Use Only APPROVED BY: Conditions of Approval (if app):	0	Telephone No. 505-748-1471 SENTATIVE II/STAFF MANAGER DATAPR 0 8 2005