b			
Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103	
Office District I	Energy, Minerals and Natural Resources	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	
District II	OIL CONSERVATION DIVISION	30-025-37075	
1301 W. Grand Ave., Artesia, NM 88210 District III		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE STATE	
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		VA-2149	
F	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		. Deuse Hume of Omt Agreement Hame	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		Faron State Unit	
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🛛 Other 🗍	8. Well Number	
		1	
2. Name of Operator		9. OGRID Number	
Yates Petroleum Corporation	on	025575	
3. Address of Operator 105 S. 4 th Street, Artesia, N	D.C. 00010	10. Pool name or Wildcat	
	NM 88210	Wildcat Mississippian (Gas)	
4. Well Location		/	
Unit Letter <u>B</u> :	760 feet from the <u>North</u> line and <u></u>	1830 feet from the East line	
Section 5	Township 9S Range 32E	NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4410' GR			
Pit or Below-grade Tank Application 🗌 o	r Closure 🗌		
Pit type Depth to Groundwater	Distance from nearest fresh water well Dis	tance from nearest surface water	
Pit Liner Thickness: mil		nstruction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	TENTION TO: SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		
	CHANGE PLANS		
PULL OR ALTER CASING			
OTHER:		Production Casing	
13. Describe proposed or compl	eted operations. (Clearly state all pertinent details, and	give pertinent dates, including estimated date	
of starting any proposed wo or recompletion.	rk). SEE RULE 1103. For Multiple Completions: Att	tach wellbore diagram of proposed completion	

w/1030 sx 15:61:11 "P, C and CSE2" w/additives. TOC calculated @ 3500'.

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I hereby certify that the information above is true and complete to the best of my know	ledge and belief. I further certify that any nit or below-
grade tank has been/will be constructed or flosed according to NMOCD guidelines , a general per	it ar an (attached) alternetive OCD enarroyed alter
	ine in or an (attached) after hative OCD-approved plan [].
SIGNATURE TITLE Regulatory Con	npliance Technician DATE 6-2-05
	DITL 0-2-05
Type or print name <u>Stormi Davis</u> E-mail address: <u>stormid(a</u>	vpcnm.com Telephone No. 505-748-1471
For State Use Only	
	MENGINEER JUN 0 6 2005
DETERIO EL	M ENGINEER 2003
APPROVED BY: TITLE PETROLEU	DATE
Conditions of Approval (if any):	DATE
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