Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I Enc. 1625 N. French Dr., Hobbs, NM 88240	ergy, Minerals and Natural Resources	May 27, 2004 WELL API NO.
District II	IL CONSERVATION DIVISION	30-025-37920
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		VA-2150
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		7. Lease Name or Unit Agreement Name
		Faron State Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Other		8. Well Number
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator 105 S. 4 th Street, Artesia, NM 88210		10. Pool name or Wildcat
105 S. 4 th Street, Artesia, NM 88210 Wildcat Mississippian (Gas) 4. Well Location		
	feet from the South line and	660 feet from the West line
Section 5	Fownship 9S Range 32E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application or Closure		
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water		
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:		
	AND ABANDON ☐ REMEDIAL WO	
		RILLING OPNS. □ P & A □
PULL OR ALTER CASING	PLE COMPL	NT JOB
OTHER:	☐ 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.		
8-28-06 Made 5' of new hole. TD=25'. Hole size=12-1/4". Notified Sylvia Dickey w/Hobbs NMOCD via email.		
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		1996 - 1996
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 SIGNATURE	TITLE Regulatory Compl	liance Technician DATE 9-5-06
Type or print name		
Type or print name Stormi Davis For State Use Only	E-mail address: stormid@ype	<u>cnm.com</u> Telephone No. <u>505-748-1471</u>
71 1,1'	OG FIELD REPRESENTAT	
APPROVED BY: Low W. W. Conditions of Approval (if any):	TITLE	DATESEP_0-8 2006