Submit 3 copies to Appropriate District Office	State of No	ew Mexico	Form C-103
DISTRICT !	Energy, Minerals and Natural Resources		Revised March 25, 1999
1625 N. French Dr., Hobbs NM 88240 DISTRICT II	<u>-</u>		WELL API NO.
1301 W. Grand Avenue, Artesia NM 88210			30-025-36320
DISTRICT III 1000 Rio Brazos Rd., Aztec NM 87410	1220 South S		5. Indicate Type of Lease
DISTRICT IV	Santa Fe, New Mo	exico 8/504-2088	STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 875	05		VA-1897
	SUNDRY NOTICES AND REPORTS OF	N WELLS	7. Lease Name or Unit Agreement Name
I,	PROPOSALS TO DRILL OR TO DEEPEN OF APPLICATION FOR PERMIT" (FORM C-101		·
1. Type of Well:			Waylon State Unit
Oil Well Gas Well X Other			
2. Name of Operator			I8. Well No.
Yates Petroleum Corporation			2
3. Address of Operator			9. Pool Name or Wildcat
10	05 South 4th Str., Artesia, N	<i>M</i> 88210	Wildcat S113411J; Miss (Gas)
4. Well Location			
Unit Letter M 66	0 feet from the South	line and 660	feet from the West line
Section 15	Township 11S Range	34E NMPM	County Lea
10	D. Elevation (Show whether DF, RKB, 4143' GR	RT, GR, etc.)	
11. Check Appropriate E	Box to Indicate Nature of Notice,	Report, or Other Data	
• • •	FINTENTION TO:	SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
			<u></u>
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB]
OTHER:		OTHER: Productio	n Casing X
12. 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 recompilation.			
9-3-03 TD 8-3/4" hole to 12560' @ 8:00 p.m. Ran 5-1/2" 17# casing set @ 12560'. Cemented w/1750 sx Class H POZ w/additives. Tailed in w/1325 sx Super C Modified w/additives.			
			OCD HOPPS OCD STATE OCD ST
Thereby certify that the inform	nation above a true and complete to the	best of my knowledge and belief. Regulatory Compliance Techr	nician DATE 9/8/03
	ormi Davis	regulatory compliance recili	
Type or print name St			Telephone No. 505-748-1471
APPROVED BY	up W. Winhard	ELD REPRESENTATIVE H/STAFF	DATE SFP 1 1 2003

Conditions of approval, if any.