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State of New Mexico

DISTRICT Energy, Minerals and Natural	Resources Department	
P.O. Box 1980, Hobbs NM 88240		WELL API NO. 30-005-20827
DISTRICT II OIL CONSERVAT		5. Indicate Type of Lease
P.O. Drawer DD, Artesia NM 88210 P.O. Box		State X FEE
DISTRICT III Santa Fe, New Mexico	87504-2088	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd., Aztec NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS		
	DEEDEN GETTIETHELT TO A	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DIFFERENT RESERVOIR. USE "APPLICATION F		7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)	3	
1. Type of Well:	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	-
OIL GAS	DET 2003	
WELL OTHER	m	LOVELEGG LO STATE
2. Name of Operator	S KELEIVED	LOVELESS LQ STATE 8. Well No
Yates Petroleum Corporation	OCD - ARTESIA	4. 4
3. Address of Operator 105 South 4th., Artesia, NM 88	210 (2)	9. Pool Name or Wildcat TULK WOLFCAMP
4. Well Location	\$133242E	
Unit Letter K: 1980 Feet From The SOUTH	Line and 1890 Fe	et From The WEST Line
Section 36 Township 731S Range 3/36E	NMPM	CHAVES COUNTY
10. Elevation (Show whether DF, RK	B, RT, GR, etc.)	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
X(((((((((((((((((((((((((((((((((((((<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO:	SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPODADII V ADANDONI CIIANOE DI ANO	COMMENCE DELL'AND ORMO	
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB	
OTHER	OTHER CORRECTION	FOR C-129
12. Describe Proposed or Completed Operations (Clearly state al	l pertient details, and give pertinenet	dates, including estimated
date of starting any proposed work) SEE RULE 1103.		
The meter was never de-activated on this well as state	ad by the transporter This well	has not vented
The meter was never de-activated on this well as state	ed by the transporter. This well	nas not vented.
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I hereby certify that the information above a true and complete to the best of my knowledge and	belief.	
SIGNATURE MENTILE VACA	TITLE REGULATORY COMP.	<i>LIANCE</i> date 10/6/03
TYPE OR PRINT NAME DONNA CLACK		TELEPHONE NO. 505-748-1471
		-5
(This space for State Use)	PETROLEUM ENGINE	ЬН
APPROVED BY TITLE	PEHIOLES	DATE 00T 1 6 2003
CONDITIONS OF APPROVAL, IF ANY:	**************************************	<u> </u>