Office Office	· :	State of Ne	w Mexico			Form C-103		
DISTRICT I 1625 N. French Dr., Hobbs NM 8824	_o Energy, M	Energy, Minerals and Natural Resources				Revised March 25, 1999 WELL API NO.		
DISTRICT II 1301 W. Grand Avenue, Artesia NM 8		OIL CONSERVATION DIVISION					25_27004	
DISTRICT III		1220 South St. Francis Dr.				30-025-27904 5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec NM 8741	⁰ Santa F	e, New Me	exico 8750	4-2088		STATE X	FEE	
DISTRICT IV 1220 S. St. Francis Dr., Santa Fe, NM	87505				6. Sta	te Oil & Gas		
Table 5. Oct. Flancis 51., Cana Fe, Tim	SUNDRY NOTICES AND R	PEPORTS ON	IWFILS		7 1 63		.G-718 Unit Agreement Name	
(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 PROPOSALS.)						ise Name of	Onit Agreement Name	
1. Type of Well: Oil Well X Gas Well Other						Brent US State		
2. Name of Operator					8. We	II No.		
Yates Petroleum Corporation							1	
3. Address of Operator 105 South 4th Str., Artesia, NM 88210						Pool Name or Wildcat Sandhills Grayburg San Andres		
4. Well Location								
Unit Letter K :	1650 feet from the	South	line and _	1650	feet fr	om the	West line	
Section 32	Township 20S	Range		NMPM	Lea	County		
	10. Elevation (Show wheth 3553' (RT, GR, etc	:.)				
11. Check Appropriat	e Box to Indicate Nature	e of Notice,	Report, o	Other Data				
NOTICE	OF INTENTION TO:			SUBSEQU	ENT REPO	ORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL V	VORK	X ALTER	ING CASING		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE	DRILLING OPNS.	PLUG	AND ABANDONM	ENT	
PULL OR ALTER CASING	MULTIPLE		CASING TES	T AND CEMENT JOB	一			
OTHER:	COMPLETION		OTHER:					
12. Describe proposed or o	completed operations. (Clear	ly state all pe	rtinent detail	s, and give pertine	nt dates, incl	uding estimat	ed date	
	ed work). SEE RULE 1103. F					-		
10-24-03 to 10-31-03 MIRU. Perforated Grayburg 4326-4334' (16) w/2 JSPF. Acidized 4299-4334' w/1500 gal 15% NEFE HCl w/200# acid flakes w/25 BS.								
							C> 3600 PE 2527	
V.	ormation above a true and co	mplete to the	=	_			- 19 15 18 1	
SIGNATURE	me Dours	_ TITLE _	Regulate	ory Compliance	Technician	DATE	11/3/03	
Type or print name	Stormi Davis	Δ_				Telephone N	o. 505-748-1471	
(This space for State use)	Harry 42 (2) 10	LOCI	FIELD REP	PECENITATE		DATE	NOV 1 0 2000	

Submit 3 copies to Appropriate District

Conditions of approval, if any: