Submit 3 Copis 10 Appropriate 14 State of New Mexico Office District I 1625 N. French D. Hobbs, 2M 8824008  District II 1301 W. Grand Ave., Artesia, NM 88210  District III 1000 Rich Brazos Rt 14 State 187440 District IV  Santa Fe, NM 87505	Form C-103 June 19, 2008  WELL API NO. 30-025-39117  5. Indicate Type of Lease STATE FEE  6. State Oil & Gas Lease No.
1220 S. St Francis Dr , Santa Fe, NM 87505	V-5617
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	Kris BMV State Com
1. Type of Well: Oil Well Gas Well Other	8. Well Number 3
2. Name of Operator Yates Petroleum Corporation	9. OGRID Number 025575
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210	10. Pool name or Wildcat Eight Mile Draw; Mississippian
4. Well Location Unit Letter A: 660 feet from the North line and	990 feet from the East line
Section 34 Township 11S Range 34E  11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Lea County
4159' GR	
12. 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  TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRIL  PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT  DOWNHOLE COMMINGLE	LING OPNS. P AND A
OTHER: OTHER:	Drilling 5' of new hole
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.	
10/20/08 Made 5' of new hole @ 9:15 a.m. TD = 15'. Notified Sylvia Dickey w/Hobbs NMOCD via e-mail.	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
Au i K i	
SIGNATURE TITLE Regulatory Compliance	Technician DATE 10/20/08
Type or print name Allison Barton E-mail address: abarton@ypcnm.com	
APPROVED BY: TITLE Conditions of Approval (if any):	DATE 0 CT 2 3 2008