Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	June 19, 2008 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	CLI CONCEDIVATION DIVICION	30-025-36994
1301 W. Grand Ave., Artesia, NM 88210 · District III	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
	DEC U. L. (1/1/220 South St. Francis Dr. Santa Fe, NM 87505	STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Saina Fe, IVIVI 87303	6. State Oil & Gas Lease No.
87505	HOBBSOCD	VO-5455
SUNDRY NOT	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLI	ISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	Cash State Unit
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other	8. Well Number
	Cas well	5
2. Name of Operator Yates Petroleum Corporation	·	9. OGRID Number 025575
3. Address of Operator		10. Pool name or Wildcat
105 South Fourth Street, Artesia, N	JM 88210	X-4 Ranch; Morrow, West (Gas)
4. Well Location		
Unit Letter B:	1290 feet from the North line and	1980 feet from the East line
Section 19	Township 10S Range 34E 11. Elevation (Show whether DR, RKB, RT, GR, e	NMPM Lea County
	4207' GR	<i>(c.)</i>
12 Charle Ammanista Day to Indicate Natura of Natice Depart on Other Date		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
		IBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WO	
TEMPORARILY ABANDON DULL OR ALTER CASING		PRILLING OPNS. P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEME	ENT JOB L
DOWN TOLL GOTHWANTELL		
OTHER:	OTHER:	
	pleted operations. (Clearly state all pertinent details, ork). SEE RULE 1103. For Multiple Completions:	
or recompletion.		
•	OPER.	OGRID NO 25575
EW-II N	PBOPE	ERTY NO. 37524
Former Well Name: Cash State Unit #5	POOL C	~ ~ ~ ~ ~
cush suite emens		
New Well Name:	EFF. D	ATE 12-15-08
Cash BNJ State Com #5	API NO	30-025-36994
Effective 12/15/08		
<u></u>		
Spud Date:	Rig Release Date:	
	Tag resease Bate.	<u> </u>
I hereby certify that the information	above is true and complete to the best of my knowled	dge and belief.
044	C 1	
SIGNATURE CULTON TITLE Regulatory Compliance Technician DATE 12/02/08		
Type or print nameAllison Barton E-mail address:abarton@ypcnm.com PHONE: (575) 748-4385 .		
For State Use Only		
APPROVED BY:	TITLE BETROLEUM E	ENGINEER DEC 17 200
Conditions of Approval (if any):	THEE_	DATE