Submit 3 Copies to Appropriate District Office	State of	Form C-103 Revised March 25, 1999					
District I Energy, Minerals and Natural Resources						tevised wiarch 25,	, 1999
1625 N. French Dr., Hobbs, NM 88240 District II				WELL API NO. 30-025-36133			
District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION				5. Indicate Type of Lease			
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Aztec, NM 87410 2040 South Pacheco St.				STATE X FEE		
District IV	Santa Fe, NM 87505			6. State Oil & Gas Lease No.			
2040 South Pacheco, Santa Fe, NM 87505				V-5843			
SUNDRY NOTIC	ES AND REPORTS	ON WE	LLS	7. Lease Nat	me or Unit Agree	ement 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.)							
1. Type of Well:				Bart "AXL" State			
Oil Well Gas Well X Other				Buit TIXE State			
2. Name of Operator				8. Well No.			
Yates Petroleum Corporation				1			
3. Address of Operator				9. Pool name or Wildcat			
105 South Fourth Street, Artesia, New Mexico 88210				Wildcat			
4. Well Location	-/			•			
Unit Letter: <u>C</u> : <u>66</u>	60 feet from the	North	line and	1650	_feet from the_	West	line
Section 24	Township	15S Ra	nge 34E	NMPM	County	lea	
	10. Elevation	n <i>(Show wh</i>	ether DF, RKB,	RT, GR, etc.)			
			4054' GR				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data							
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:							
PERFORM REMEDIAL WORK				кк [ALTE	RING CASING	
	CHANGE PLANS		COMMENCE DR		PLUG ABAN	AND DONMENT	
PULL OR ALTER CASING			CASING TEST A CEMENT JOB	AND [
OTHER: Extend APD		X	OTHER:				
12. Describe proposed or comple of starting any proposed wo	-		ertinent details, le Completions:				
or recompletion.							
					3,450	378970	
					12	· Caller	`
Yates Petroleum Corporation wish	as to request that the armi	nation data	for the ADD he as	standed for any		- @ 2005) è
Thank you.	es to request that the expl	ration date	for the ADP be ex	ctended for one	(1) year to Janga	ry 2005.	e.
Thank you.							
C					1 tes	1999 1 m	
Expires	01/29/05						
I hereby certify that the informa	tion above is true and co	omplete to	the best of my kr	nowledge and t	pelief.	2000	
SIGNATURE Dollario	Deallas E.	-	Regulatory 7	0		10/00/02	
	20		Regulatory I		DATE_	12/29/03	
Type or print name Debbie L. C.	affall				Telephone No.	(505) 748-43	364
(This space for State use) QC FIELD REPRESENTATIVE II/STAFF MANAGER IAN 0 2 2004							
APPROVED BY A DATE DATE DATE DATE							
Conditions of approval, if any:							
N							