Submit 3 Copies To Appropriate District	State of New Me	xico		Form C-103
Office District I	ergy, Minerals and Natu	ral Resources		June 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II 1301 W Grand Ave Artesia NM 882162 CONSERVATION DIVISION			30-025-38889	
District III			5. Indicate Type of Lease	
District II 1301 W Grand Ave., Artesia, NM 88216 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Sonta Fa NM 87505			STATE 🖂	FEE
District IV AUL: 9 H Mill Salita Fe, INVI 67505			6. State Oil & Gas Le	ase No.
	2000			
HOBBSOCD			V-5559	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or 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.)			Merle BOE	State Com
1. Type of Well: Oil Well Gas Well Other			8. Well Number	,
/ dut went by outer			1	7 /
2. Name of Operator			9. OGRID Number	/
Yates Petroleum Corporation /			025575	
3. Address of Operator			10. Pool name or Wildcat	
105 South Fourth Street, Artesia, NM 88210			X-4 Ranch; Mississippian (Gas)	
4. Well Location				
Unit Letter N : 660	feet from the South	line and	1980 feet from the	West / line
	Township 10C Do	-	NMPM Lea-	
Section 12		nge 34E		County
11. EI	evation (Show whether DR) 4182		:)	
	4102	UK		
12. Check Approp	riate Box to Indicate N	ature of Notice	, Report or Other Dat	a
NOTICE OF INTENT	IONITO	0.115	OFOLIENT DEDOL	DT OF
NOTICE OF INTENT			SEQUENT REPO	
_ _	AND ABANDON	REMEDIAL WOR		ERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING MULT	IPLE COMPL	CASING/CEMEN	NT JOB 🗌	
DOWNHOLE COMMINGLE			•	,
	_			
OTHER:		OTHER:	Drilling 5' of n	
13. Describe proposed or completed op				
of starting any proposed work). SE	E RULE 1103. For Multip	le Completions: A	attach wellbore diagram o	f proposed completion
or recompletion.				
8/24/09 Made 5' of new hole @ 2:30 p.m. TD = 55'. Notified Sylvia Dickey w/Hobbs NMOCD via e-mail.				
			·	
Spud Date:	Rig Release Da	ite:		
c .	•	•	•	•
I hereby certify that the information above is	true and complete to the be	est of my knowled	ge and belief.	
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SIGNATURE / LLLSON ON ON	, TITLE Reg	ulatory Complianc	ce Technician DATE	8/26/09
- Carrier Tollow	,	x.c. j Compilant	, DITTE	
Type or print name Allison Barton	E-mail address: abar	ton@yatespetroler	mi.com PHONE:	(575) 748-4385
For State Use Only		11 11.7	1110111.	(0.0) / 10 1505 .
	pett	DOI ETHA EVATA	ble Bide	05001000
APPROVED BY:	TITLE	roleum, engan	DATE	SEP 0 1 2009
Conditions of Approval (if any):				