Submit 3 copies to Appropriate District Office	State of N	New Mexico	Form C-103
DISTRICT I	Energy, Minerals ar	nd Natural Resources	Revised March 25, 1999
1625 N. French Dr., Hobbs NM 88240 DISTRICT II	OIL CONSERV	WELL API NO.	
1301 W. Grand Avenue, Artesia NM 882		ATION DIVISION St. Francis Dr.	30-025-36479 5. Indicate Type of Lease
DISTRICT III  1000 Rio Brazos Rd., Aztec NM 87410		Mexico 87504-2088	STATE X FEE
DISTRICT IV	Santa i e, i ee	10X100 07 00+ 2000	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87	505		VA-1894
SUNDRY NOTICES AND REPORTS ON WELLS (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.)			7. Lease Name or Unit Agreement Name
1. Type of Well:			Cash State Unit
Oil Well Gas Well X Other			
2. Name of Operator			8. Well No.
Yates Petroleum Corporation			1 .
3. Address of Operator			9. Pool Name or Wildcat
	105 South 4th Str., Artesia, N	IM 88210	Wildcat Mississippian
4. Well Location Unit Letter	980 feet from the South	line and 1980	feet from the <u>East</u> line
Section 31	Township 10S Range	34E NMPM	County Lea
1 A	0. Elevation (Show whether DF, RKE 4234' GR	B, RT, GR, etc.)	
11. Check Appropriate	Box to Indicate Nature of Notice	e, Report, or Other Data	
NOTICE O	F INTENTION TO:	SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE	CASING TEST AND CEMENT JOB	]
L	COMPLETION		, <u> </u>
OTHER:		OTHER: Production	on Casing X
12. 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 recompilation.			
2-17-04 TD 8-3/4" hole to 12929' @ 8:15 p.m. Ran 4-1/2" 11.6# casing set @ 12924' Cemented w/2935 sx Class H w/additives. Tailed in w/1565 sx Class C w/additives. Cement circulated			
Thereby certify that the information SIGNATURE	mation above a true and complete to the	e best of my knowledge and belief. Regulatory Compliance Techr	nician DATE 2/20/04
Type or print name	tormi Davie		
Type or print name Stormi Davis  (This space for State use)			
APPROVED BY  Conditions of approval, if any:  Conditions of approval, if any:			