Submit 3 Copies to Appropriate District Offica.	Energy, M	State of New I als and Natural	Mexico Resources Department	Form C-103 Revised 1-1-89				
DISTRICT ! P.O. Box 1980, Hobbs, NM 88240		NSERVATI P.O. Box 2 Fe, New Mexic	Well. Api NO. 30-025-29843					
DISTRICT II P.O. Drawer DD, Artonia, NM 88210	Santa	5. Indicate Type of Lease STATE X FEE						
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. V0-4510							
SUNDRY NOT (DO NOT USE THIS FORM FOR PR DIFFERENT RESEL (FORM C	7. Lease Name or Unit Agreem	ent Name						
I. Type of Well: OL GAS WELL X		OTHER		Sand Spring ASU State				
2. Name of Operator YATES PETROLEUM CORPOR	8. Well No. 1							
3. Address of Operator 105 South 4th St., Art	9. Pool same or Wildcat Sand Springs Atoka (gas)							
4. Well Location Unit Latter :330	Feet From 7	TheNorth	Line and16	50 Feet From The We	est Line			
Section 11	Township 10.1	levation (Show wheth	Range 34E ar DF, RKB, RT, GR, etc.) 45' GR	NMPM Lea	County			
11. Check NOTICE OF IN	Report, or Other Data BSEQUENT REPORT	OF:						
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING								
TEMPORARILY ABANDON CHANGE PLANS X COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT								
PULL OR ALTER CASING CASING TEST AND CEMENT JOB								
OTHER:			- <u></u>	[

work) SEE RULE 1103.

Yates Petroleum Corporation respectfully requests permission to drill to a depth of 13,500' to test the Devonian and intermediate formations. Application for Permit to Drill, Re-Enter originally requested permission to drill to 12200' Atoka.

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I hereby certify that the information above is to SIONATURE	nigs and baller.	Operations Technician		DATEOctober 29, 1998 TELEPHONE NO. 505/748-1471		
TYPEOR FUNTNAME Rusty Klei	ln				TELEPHONE NO.	505/748-147.
(This space for State Use)	A MS				. *	1
	server and the server	11118			DATE	
APPROVED BY						
,						

District I PO Box 1980, Hobbs, NM 88241-1980 Pistrict II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87416 District IV PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 Form C-102 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

AMENDED REPORT

			,	
WELL LOCATI	ON AND	ACREAGE	DEDICATION	PLAT

API Number			1	² Pool Code		³ Pool Name					
30-025-29843 Undesignated Devonian											
⁴ Property Code ⁵ Property Name ⁶ Well Number									Well Number		
23599		Sand Spring ASU State							1		
'OGRID No.				¹ Operator Name					* Elevation		
025575		Ya	tes Pet	roleum	Corpora	itio	n				4145'
					¹⁰ Surf	face	Location	·····		L	
UL or lot no.	Section	Township	Range	Lot Idn	Feet from	the	North/South line	Feet from the	East/Wes	West line County	
С	11	115	34E		330		North	1650	West		Lea
		•	¹¹ Bot	tom Hole	e Locatio	on I	f Different Fro	om Surface	l		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from		North/South line	Feet from the	East/West	t line	County
			, , ,								County
¹³ Dedicated Acr	es '' Joint	or Iafill 14 (Consolidatio	n Code 1 ¹⁵ O	rder No.			L			<u> </u>
40											
the second s	VABLE	WILL BE A	SSIGNE	D TO THI	S COMPL	ETIC	ON UNTIL ALL	INTERESTS H	AVE BEF		
		OR A	NON-ST	ANDARD	UNIT HA	S BE	EN APPROVED	BY THE DIVI	SION		COLIDATED
16	64	ନ୍ୟ		1				¹⁷ OPER	ATOR	CERT	IFICATION
1	50'	6 "						I hereby certif	ly that the inj	formation	contained herein is
								irve and comp	olete to the b	est of my l	trowledge and belief
										2	
								Kut	rt k	10	
								Signature	in i	yen	
								Rusty K	lein		
								Printed Name			
								Operations Technician			
October 29,				29, 19	1998						
l	Date										
								18SLIR VI	FYOR	ГЕРТ	IFICATION
	¹⁸ SURVEYOR CERTIFICATI I hereby certify that the well location shown on this							1			
								was plotted fro	m field notes	of actual	surveys made by
				1				and correct to			t the same is true
				1				REFER TO) ORIGI	NAL P	LAT
								Date of Survey	, ·		
			•	+				Signature and S	Scal of Profe	ssional Su	rveyer:
			•								ll II
			,								
											1
				-	Certificate Nun	nber					

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