rrit 3 copies to Appropriate District State of New Mexico REICT I Energy, Minerals and Natural Resources				esources	Form C-103 Revised March 25, 1999 WELL API NO.			
1020 M. Grand Avenue, Artesia NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec NM 87410	1220	SERVAT South St.	5. Indicate Ty STATE					
(DO NOT USE THIS FORM FOR PROP	DRY NOTICES AND RE	DEEPEN OR F	PLUG BACK	ΤΟ Α		Gas Lease No. ne or Unit Agreement Nam	e	
DIFFERENT RESERVOIR. USE " APP PROPOSALS.) 1. Type of Well: Oil Well X Gas Well	Other		011 30011			Shipp ZI		
2. Name of Operator Yates Petroleum Corporation					8. Well No.	2		
3. Address of Operator 105 South 4th Str., Artesia, NM 88210						9. Pool Name or Wildcat Lovington Upper Penn Northeast		
4. Well Location Unit Letter <u>D</u> : 660	feet from the	North	line and	1100	feet from the	e <u>West</u> line		
Section 27 T	ownship 16S	Range	37E	NMPM	Co	ounty Lea		
2004 10. Ele	evation (Show whether 3786.5' G		RT, GR, etc)				
11. Check Appropriate Box NOTICE OF IN		of Notice, F	Report, or	Other Data SUBSEQU	ENT REPORT C	DF:		
	PLUG AND ABANDON		REMEDIAL V	ORK	ALTERING CAS			
	CHANGE PLANS		COMMENCE	DRILLING OPNS.	PLUG AND ABA			
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TES	T AND CEMENT JOB				
OTHER:			OTHER:					

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date C of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Plans are to clean out well to Strawn perforations 11461-11475'. Set packer @ 11430' and swab test the Strawn. If fish remains in hole, will contact NMOCD for plugging requirements. If Strawn appears productive, acidize to clean up well.

If Strawn is not productive, set CIBP @ 11400' and dump 35' cement on plug. Will then perforate Canyon 11184-11206' and acidize. If production is not adequate, well will be plugged.

		TITLE	best of my knowledge and belief. Regulatory Compliance Technician	DATE	1/22/03
Type or print name	Stormi Davis			Telephone No.	505-748-1471
(This space for State use APPROVED BY Conditions of approval. in		ਜਿੀਊG GAR7 ⊖ੇ⊂ H	INAL SIGNED BY WINK JELD REPRESENTATIVE IL/STAFE MA		<u>AM 22. 1941.</u>