

Submit 3 copies to Appropriate District

Office

DISTRICT I

1825 N. French Dr., Hobbs NM 88240

DISTRICT II

1301 W. Grand Avenue, Artesia NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec NM 87410

DISTRICT IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, New Mexico 87504-2088

Form C-103

Revised March 25, 1999

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.)		WELL API NO. 30-025-31694
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Yates Petroleum Corporation		6. State Oil & Gas Lease No. V-2443
3. Address of Operator 105 South 4th Str., Artesia, NM 88210		7. Lease Name or Unit Agreement Name Lotus ALT State
4. Well Location Unit Letter <u>G</u> <u>1980</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>32</u> Township <u>22S</u> Range <u>32E</u> NMPM County <u>Lea</u>		8. Well No. 2
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3538' GR		9. Pool Name or Wildcat SE Livingston Ridge Delaware

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

2-3-03 TOOH w/rods, pump, and tubing. Perforated (1 jspf) 6716-7186' w/30 holes. Acidized 7003-7186' w/1000 gals 7-1/2% IC/HCL acid w/26 BS. Acidized 6716-6888' w/1000 gals 7-1/2% IC/HCL w/34 BS.

2-5-03 Pumped delta frac on perms 6716-7186'.

2-7/8" 6.5# tubing, TAC @ 6600', S/N @ 7243'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Stormi Davis TITLE Regulatory Compliance Technician DATE 2/10/03

Type or print name Stormi Davis Telephone No. 505-748-1471

(This space for State use) ORIGINAL SIGNED BY

APPROVED BY GARY W. WINK TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE FEB 14 2003

Conditions of approval, if any: