

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

NOV 14 '90

WELL API NO.	30-015-26466
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	
Ceniza "AGZ" Com.	
8. Well No.	2
9. Pool name or Wildcat	
Assoc. S. Dagger Draw Upper Penn.	
Section 12 Township 20 South Range 24 East NMPM Eddy County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
3602' GR	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLOG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator  
Yates Petroleum Corporation

3. Address of Operator  
105 South Fourth Street, Artesia, NM 88210

4. Well Location

Unit Letter M : 725 Feet From The West Line and 660 Feet From The South Line

Section 12 Township 20 South Range 24 East NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3602' GR

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: Name Change ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

Yates Petroleum Corporation wishes to change the name from Spanish Dagger "AID" Com. #1 to Ceniza "AGZ" Com. #2.

Post ID-3  
11-16-90  
ch. wellname

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

SIGNATURE Clifton R. May

TITLE Permit Agent

DATE 11-12-90

TYPE OR PRINT NAME Clifton R. May

TELEPHONE NO. 748-1471

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

NOV 16 1990

CONDITIONS OF APPROVAL, IF ANY: