

Submit 3 Copies to Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco St.  
Santa Fe, NM 87505

WELL API NO.

30-005-63569

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

VO-5338

7. Lease Name or Unit Agreement Name:

Stare BEA State Com.

**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.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other

RECEIVED

2. Name of Operator

Yates Petroleum Corporation

MAR - 9 2004

8. Well No.

1

3. Address of Operator

105 South Fourth Street, Artesia, New Mexico 88210

OCD-ARTESIA

9. Pool name or Wildcat

Foor Ranch Pre-Permian

4. Well Location

Unit Letter: D : 660 feet from the North line and 660 feet from the West line  
Section 8 Township 9S Range 27E NMPM County Chaves

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

3874' 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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Name Change ☒

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 recompletion.

Yates Petroleum Corporation wishes to change the name of the captioned well from the  
Stare State Unit #1 to  
the Stare BEA State Com. #1 effective March 14, 2004.  
Thank you.

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

SIGNATURE Debbie L. Caffall TITLE Regulatory Technician/Land Department DATE 03/05/04

Type or print name Debbie L. Caffall Telephone No. (505) 748-4364

(This space for State use)

APPROVED BY [Signature] TITLE District Supervisor DATE MAR 23 2004

Conditions of approval, if any: