Submit 3 Copies to Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 South First, Artesia, NM 88210

State of New Mexico **Energy, Minerals and Natural Resources**

Form C-103 Revised March 25, 1999

OIL CONSERVATION DIVISION

WELL API NO.		
30-005-63569		_
5. Indicate Type	of Lease	
STATE 🔣	FEE 🗌	

District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 2040 South Pacheco, Santa Fe, NM 87505	2040 South Pachec Santa Fe, NM 875		STATE	x FEE [& Gas Lease No		
SUNDRY NOTICES AN	D REPORTS ON WE	LLS	7. Lease Nai	ne or Unit Agre	ement Name:	
(DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)						
1. Type of Well: Oil Well Gas Well X	Other F	RECEIVED		Stare BEA State	Com. 33584	
2. Name of Operator		MAR - 9 7004	8. Well No.			
Yates Petroleum Corporation				1		
3. Address of Operator		9. Pool name or Wildcat				
105 South Fourth Street, Artesia, New Mexico 88210		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 Ra	inge 27E	NMPM	County	Chaves	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3874' GR						
11. Check Approp	priate Box to Indicate	Nature of Not	ice, Report,	or Other Dat	a	
			UBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG	AND ABANDON	REMEDIAL WOR	rk [ALTE	RING CASING	
TEMPORARILY ABANDON CHAN	IGE PLANS	COMMENCE DR	ILLING OPNS	PLUG ABAN	AND IDONMENT	

OTHER: 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.

CASING TEST AND

CEMENT JOB

Yates Petroleum Corporation wishes to change the name of the captioned well from the Stare State Unit #1 to

MULTIPLE

COMPLETION

the Stare BEA State Com. #1 effective March 14, 2004.

Thank you.

PULL OR ALTER CASING

I hereby certify that the information above is true and	complete to the best of my knowledge and	belief.	
SIGNATURE Delbre J. Callago	TITLERegulatory Technician/Land Depar	tment DATE	03/05/04
Type or print name Debbie L. Caffall		Telephone No.	(505) 748-4364
(This space for State use) Line tel them	District Sugar war		5400
APPROVED BY	TITLE	DATE	MAR 1 5 2004
Conditions of approval, if any:			