

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.

30-5-63560

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

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

APR 14 2004

Yates Petroleum Corporation

3. Address of Operator

OED-ARTESIA

105 South Fourth Street, Artesia, New Mexico 88210

7. Lease Name or Unit Agreement Name:

Rolla TC

8. Well No.

3

9. Pool name or Wildcat

Undes. Foor Ranch; Pre-Permian Gas

4. Well Location

Unit Letter: I : 1980 feet from the South line and 660 feet from the East line
Section 30 Township 9S Range 26E NMPM County Chaves

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

3738

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: Extend APD ☒

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 extend the captioned well's APD expiration date for one (1) year to April 29, 2005.
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 04/12/04

Type or print name Debbie L. Caffall/debbiec@ypcnm.com Telephone No. (505) 748-4364

(This space for State use)

APPROVED BY Jim M. Brown TITLE District Supervisor DATE APR 13 2004

Conditions of approval, if any: