Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-015-28413
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE S FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		L-1897
SUNDRY NOT	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)		Aparejo APA State Com  8. Well Number
1. Type of Well: Oil Well	Gas Well Other	8. Well Number
2. Name of Operator	APR - 2 2008	9. OGRID Number
Yates Petroleum Corporati		025575
3. Address of Operator	OCD-ARTESIA	10. Pool name or Wildcat
105 S. 4 <sup>th</sup> Street, Artesia,	NM 88210	N. Seven Rivers; Glorieta-Yeso
4. Well Location Unit Letter B: 660 feet from the North line and 1980 feet from the East line		
Section 16 Township 19S Range 25E NMPM Eddy County  11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3475'GR		
Pit or Below-grade Tank Application or Closure		
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water		
Pit Liner Thickness: mil	Below-Grade Tank: Volumebbls;	Construction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON   REMEDIAL WO	BSEQUENT REPORT OF:  RK
TEMPORARILY ABANDON	<del></del>	RILLING OPNS. PLUG AND ABANDON
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	<del></del>
0711-		
OTHER: Name Change		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion		
or recompletion.		
E WILL A CARACTER OF 102		
Former Wellname: Aparejo APA State Com #3		
New Wellname: Aparejo APA State #3		
-F3		
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.		
11.	graduation in personal persona	_ or an (account) and many to obs approved plan
SIGNATURE Leave Luc	TITLE Regulatory Compliance Sur	pervisor DATE March 31, 2008
Type or print name Tina Huer	ta E-mail address: tinah@ypcnm.	<u>com</u> Telephone No. <u>505-748-1471</u>
Type of print name Tima Huer	L-man address. unan@ypcmn.	1 elephone 1vo. <u>303-748-14/1</u>
For State Use Only		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		