Submit 3 Copies to Appropriate District Office

## F' 'e of New Mexico Energy, Minerals d Natural Resources Departmen

Form C-103 Revised 1-1-89

DISTRICT I  DO BOY 1980 Hobbs NM 88240  OIL CONSERVATION DIVIS	ION WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St.	30-015-31604
DISTRICT II Santa Fe. NM 87505	5. Indicate Type of Lease
P.O. Drawer DD, Artesia, NM 88210	STATE X FEE
<u>DISTRICT III</u>	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410	V-2705
SUNDRY NOTICES AND REPORTS ON WELL	S
(DO NOT USE THIS FORM FOR PORPOSALS TO DRILL OR TO DEEPEN OR PLUG BA	0
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	Graham AKB State
(FORM C-101) FOR SUCH PROPOSALS)  1. Type of Well:	
OIL A GAS WELL OTHER	
2. Name of Operator	8. Well No.
Yates Petroleum Corporation	3
3. Address of Operator	9. Pool name or Wildcat
105 S. 4th Street, Artesia, NM 88210	Undesignated Lost Tank Delaware
4. Well Location	
Unit Letter B 660 Feet From The North Line a	nd 1,650 Feet From The East Line
Section 2 Township 22S Range 31E	NMPM Eddy County
10. Elevation (Show whether DF,	
3,536'	
Check Appropriate Box to Indicate Nat	ure of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ALTERING CASING REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS X COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND CEMENT JOB	
OTHER: OTHE	R:
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed	
<i>work)</i> SEE RULE 1103.  Yates Petroleum Corporation respectfully requests permission to make the following changes to the APD for this well.	
We would like to set the 13 3/8" casing at 850' instead of at 650' as originally permitted. This is still prior to drilling the salt, bu	
of the Ruslter to be drilled prior to running casing. Also, we would like to set the 8 5/8" salt protection string at 4,200' instead of	
originally permitted.	
RECEIVED 25	
RECEIVED RECEIVED OCD ARTESIA	
Thank you.  Thereby certify the option above is true and complete to the best of my knowledge and belief	
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Thank you,	2031-1202
I hereby certify that the information above is true and complete to the best of my knowledg SIGNATURE  TITLE	e and benef.
TYPE OR PRINT NAME Cory Frederick	TELEPHONE NO. (505)-748-4214
(This space for State Use)	
	LE Envir Eng Specie
CONDITIONS OF APPROVAL, IF ANY	