| Submit 3 Copies To Appropriate District | State of New Mexico | Form C-103 |
|---|--|--|
| Office District I | Energy, Minerals and Natural Resources | June 19, 2008 |
| 1625 N French Dr., Hobbs, NM 88240 | | WELL API NO. |
| 1625 N French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave, Artesia, NM 88210 | | 30-025-36672 5. Indicate Type of Lease |
| 1000 C 1 C D | | STATE STEE |
| 1000 Rio Brazos Rd., Aztec, NM 8741 APR 17 2005 South St. Francis Dr. District IV Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NAOBB | SOCIE | |
| 87303 | | VO-5596 |
| | S AND REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name |
| (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 | | Oakridge State Unit |
| PROPOSALS) | <u></u> | 8. Well Number |
| 1. Type of Well: Oil Well Gas | s Well 🛛 Other | 1 |
| 2. Name of Operator | | 9. OGRID Number |
| Yates Petroleum Corporation / | | 025575 |
| 3. Address of Operator | | 10. Pool name or Wildcat |
| 105 South Fourth Street, | | Eight Mile Draw; Morrow, Northwest/ |
| Artesia, NM 88210 | | Eight Mile Draw; Atoka; Northwest/ |
| | · _ | Wildcat; Austin |
| -4: Well Location | manual transfer of the second | |
| Unit Letter B : 680 | feet from the North line and | 1620 feet from the <u>East</u> line |
| Section 17- | Township 11S Range 34E | |
| | 1. Elevation (Show whether DR, RKB, RT, GR, etc. | r.) |
| | 4202' GR | |
| 12 Charle Ann | | Parant on Other Date |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | |
| NOTICE OF INTE | NTION TO: SUE | BSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK ☐ P | LUG AND ABANDON 🔲 REMEDIAL WOF | RK |
| | | RILLING OPNS. P AND A |
| | IULTIPLE COMPL | NT JOB |
| DOWNHOLE COMMINGLE | | |
| OTHER: | ☐ OTHER: | Name Change |
| 13. 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. | OPER. OGRID NO. DA | 5505 |
| Former Well Name: | PROPERTY NO. 376 | 30 70 |
| Oakridge State Unit #1 | | 69 |
| - | POOL CODE 970 | 28 |
| New Well Name: | EFF. DATE 04-27 | 7)9 |
| Oakridge BIJ State Com #1 | API NO. 30-025- | -2(1) |
| Effective 4/27/09 | 020 | -3667a |
| | | |
| | | |
| . : | | |
| Spud Date: | Rig Release Date: | |
| | | |
| | Control of the Contro | N = 2 |
| I hereby certify that the information about | ve is true and complete to the best of my knowled | ge and belief. |
| | | |
| | | A company of the second of the second |
| SIGNATURE ALL SA | | |
| SIGNATURE Ollipor Ba | | |
| SIGNATURE Allison Barto | TITLE Regulatory Compliance | te Technician DATE 4/15/09 |
| | TITLE Regulatory Compliance | <u>ce Technician</u> DATE <u>4/15/09</u> <u>om</u> PHONE: <u>(575) 748-4385</u> |
| Type or print name Allison Barto For State Use Only | TITLE Regulatory Compliance n E-mail address: abarton@ypcnm.c | <u>om</u> PHONE: (575) 748-4385 APR 2 4 2009 |
| Type or print name Allison Barto | TITLE Regulatory Compliance n E-mail address: abarton@ypcnm.c | om PHONE: (575) 748-4385 APR 2 4 2009 |