

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
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

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-29032
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Yates Petroleum Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 105 South Fourth Street, Artesia, New Mexico 88210		7. Lease Name or Unit Agreement Name: Cambridge ASC
4. Well Location Unit Letter <u>N</u> : <u>510'</u> feet from the <u>South</u> line and <u>1980'</u> feet from the <u>West</u> line Section <u>12</u> Township <u>16-S</u> Range <u>35-E</u> NMPM Lea County		8. Well No. 1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3969.6'		9. Pool name or Wildcat Townsend Morrow

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 ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: Extend APD ☒

OTHER: ☐

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 recompilation.

Yates Petroleum Corporation wishes to extend the captioned well's APD expiration date for one (1) year to March 10, 2001.

Thank you.

Expires March 10, 2001

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jamie Savoie TITLE Regulatory Technician DATE February 17, 2000

Type or print name Jamie Savoie Telephone No. (505) 748-1471
(This space for State use)

APPROVED BY Chris Williams TITLE DISTRICT SUPERVISOR DATE 2/17/2000
Conditions of approval, if any:

Received
March 1964