

Submit 3 Copies To Appropriate District Office  
District I  
 1625 N. French Dr., Hobbs, NM 88240  
District II  
 1301 W. Grand Ave., Artesia, NM 88210  
District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-005-62117	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.  Federal NM-93466	
7. Lease Name or Unit Agreement Name  Scinfeld BBK Federal	
8. Well Number  1	
9. OGRID Number  025575	
10. Pool name or Wildcat Crockett Draw; Siluro-Devonian	

**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

2. Name of Operator  
 Yates Petroleum Corporation

3. Address of Operator  
 105 S. 4<sup>th</sup> Street, Artesia, NM 88210

4. Well Location  
 Unit Letter M : 660 feet from the South line and 660 feet from the West line  
 Section 12 Township 6S Range 26E NMPM Chaves County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3811'GR

Pit or Below-grade Tank Application ☒ or Closure ☐

Pit type Workover Depth to Groundwater >100' Distance from nearest fresh water well >1000' Distance from nearest surface water >1000'

Pit Liner Thickness: 12 mil Below-Grade Tank: Volume bbls: Construction Material

**12. 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 COMPL ☐

OTHER: Pit Construction ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐  
 CASING/CEMENT JOB ☐

OTHER: ☐

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.

Pit will be constructed as per Master plan approved 12/20/04

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 ☐.

SIGNATURE Tina Huerta TITLE Regulatory Compliance Supervisor DATE April 19, 2005

Type or print name Tina Huerta E-mail address: tinah@ypcnm.com Telephone No. 505-748-1471

**For State Use Only**

APPROVED BY: [Signature] TITLE Field Rep

DATE JUN 10 2005

Conditions of Approval (if any):