Submit 3 Copies To Appropriate District Office <u>Fistrict I</u> State of New Mexico Energy, Minerals and Natural Resources  Energy, Minerals and Natural Resources  OIL CONSERVATION DIVISION District III 1000 Rio Brazos Rd , Aztec, NM 87410 District IV 1220 S St Francis Dr , Santa Fe, NM		Form C-103  June 16, 2008  WELL API NO. <b>0/5</b> • <b>36</b> • <b>479</b> 30-025-38951  5. Indicate Type of Lease  STATE FEE  6. State Oil & Gas Lease No.  VB-827 & VO-5867
SUNDRY NOTICES AND REPORTS ( (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DE DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FO PROPOSALS)  1. Type of Well: Oil Well Gas Well Other  2. Name of Operator	RECEIVED  DEC. 2.3. 2009	7. Lease Name or Unit Agreement Name Perdomo "BPM" State  8. Well Number 1  9. OGRID Number
Yates Petroleum Corporation 3. Address of Operator 105 South Fourth Street, Artesia NM 8 MOCD ARTESIA 4. Well Location		
Surface Hole Unit Letter L: 1650 feet from the South line and 660 feet from the West line  Bottom Hole Unit Letter I: 1650 feet from the South line and 330 feet from the East line  Section 24 Township 24SS Range 27E NMPM Eddy County  11. Elevation (Show whether DR, RKB, RT, GR, etc.)  3149" GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐		
OTHER:  Change bottom hole footages  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.		
Yates Petroleum Corporation wishes to change the name of the well to the <b>Perdomo "BMP" State Com. #1 H.</b> A new C-102 is attached along with the horizontal diagrams. Also include is changes in casing and cement. 37989		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  DATE December 21, 2009		
Type or print name Cy Cowan  For State Use Only  APPROVED BY: Conditions of Approval (if any)	$\overline{}$	PHONE: 748-4372  DATE 1/5/2010