

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-015-27320

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-120

7. Lease Name or Unit Agreement Name

Medano VA State

8. Well No.

#12

9. Pool name or Wildcat

Los Medanos Delaware

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 South Fourth Street

4. Well Location

Unit Letter G : 1980 Feet From The North Line and 2310 Feet From The East Line

Section 16

Township 23 South

Range 31 East

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3358' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

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.

Yates Petroleum would like to extend the above mentioned well's expiration date  
for six months.

APPROVAL VALID FOR 60 DAYS  
EXPIRES 8/10/96  
UNLESS DRILLING UNDERWAY  
LAST EXT.

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

SIGNATURE

Clifton R. May

TITLE

Regulatory Agent

DATE

1-29-96

TYPE OR PRINT NAME

Clifton R. May

(505) 748-1471

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

FEB -5 1996