

Submit 3 Copies To Appropriate District Office

District I

162<sup>nd</sup> N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 87210

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

MAY 2001

Form C-103

Revised March 25, 1999

|   |
|---|
| WELL API NO. <b>30-045-30659</b>  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. <b>V-1360</b>  |
| 7. Lease Name or Unit Agreement Name:<br><b>RISTRA AGW STATE</b>                                    |
| 8. Well No. <b>2</b>  |
| 9. Pool name or Wildcat<br><b>BISTI LOWER GALLUP</b>  |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.)  |

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-104) 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 4TH ST., ARTESIA, NM 88210**

4. Well Location

Unit Letter **N** **683** feet from the **SOUTH** line and **2080** feet from the **WEST** line  
Section **32** Township **24N** Range **9W** NMPM County **SAN JUAN**

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 ☐

OTHER: **NAME CHANGE**

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

**CHANGE WELL NAME FROM "RISTRA AGW" TO "RISTRA AGW STATE"**

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

SIGNATURE

*Brian Wood*

TITLE

**CONSULTANT**

DATE

**5-4-01**

Type or print name

**BRIAN WOOD**

**(505) 466-8120**

Telephone No.

(This space for State use)

APPROVED BY

TITLE

**DEPUTY OIL & GAS INSPECTOR**

DATE

**MAY - 7 2001**

Conditions of approval, if any:

cc: May