


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
June 16, 2008

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

WELL API NO. 30-015-36245 30 005-64019
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Chief BLC State
8. Well Number 2H 
9. OGRID Number 025575
10. Pool name or Wildcat Hightower; Devoian
4. Well Location Unit Letter <u>M</u> : <u>750</u> feet from the <u>South</u> line and <u>200</u> feet from the <u>West</u> line (Surface Hole) Unit Letter <u>P</u> : <u>750</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line (Bottom Hole) Section <u>2</u> Township <u>14S</u> Range <u>29E</u> NMPM <u>Chaves</u> County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3730' GR

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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
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.

Yates Petroleum Corporation respectfully request to change from Reserve Pit to Closed Loop System.
Enclosed is a diagram of the Closed Loop System.

ACCEPTED FOR RECORD

JAN 7 2009

Gerry Guye, Deputy Field Inspector
NMOCD-District II ARTESIA

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

SIGNATURE Clifton May TITLE Regulatory Agent DATE 1/5/2009

Type or print name Clifton May E-mail address: cliff@yatespetroleum.com PHONE: 575-748-4347

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):