Submit 3 Copies To Appropriate District. Office	State of New Mexico		Form C-103
<u>District I</u> 1625 N French Dr , Hobbs, NM 88240	Energy, Minerals and Natural Resources		June 16, 2008 WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONCEDIATION DIVIGION		30-005-63599
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	tiv Santa Fe, NM 8/505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
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			7. Lease Name or Unit Agreement Name Ric
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number
2. Name of Operator	JUL 18 2008		9. OGRID Number
Yates Petroleum Corporation 3. Address of Operator			25575 10. Pool name or Wildcat
	S. 4 th Street, Artesia, New Mexico 88210		Wildcat Granite
4. Well Location			
Unit Letter M: 1250 feet from the South line and 660 feet from the West line			
Section 20 Township 6S Range 25E NMPM County Chaves			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3806' 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			
TEMPORARILY ABANDON			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
OTHER:		OTHER:	\bowtie
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 extend the captioned well's APD expiration date for two (2) years to August 2, 2010.			
Sources at Yates Petroleum Corporation have relayed information to me that they believe there will not be enough H2S anticipated from the surface to the Basement formation to meet the OCD's minimum requirements for the submission of a contingency plan per Rule 118.			
C144 Attached			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certify that the information above is true and complete to the best of my knowledge and benef.			
SIGNATURE Regulatory Agent/Land Department DATE July 18, 2008			
Type or print name Debbie L. Caffall E-mail address debbiec@ypcnm.com PHONE: (575) 748-4376 For State Use Only			
Drews	Jun	•	DATE 8-11-08
APPROVED BY: DATE DATE Conditions of Approval (if any)			