Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		FEB -9 2009	Form C-103 June 19, 2008
District I 1625 N. French Dr., Hobbs, NM 88240 District II		, i	WELL API NO.	
1301 W Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION		30-005-63556  5. Indicate Type of Least	se
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE   State Oil & Gas Leas	FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505			7. State Off & Gas Leas	e No.
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI	TICES AND REPORTS ON WELI DSALS TO DRILL OR TO DEEPEN OR P ICATION FOR PERMIT" (FORM C-101)	LUG BACK TO A	7. Lease Name or Unit . Biplane Unit	Agreement Name
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other			3. Well Number	
2. Name of Operator Yates Petroleum Corporation			O. OGRID Number 025575	
3. Address of Operator			10. Pool name or Wildo	i i
105 South Fourth Street, Artesia, NM 88210			Haystack; Cisco/Haystac	ck; Mississippian
4. Well Location Unit Letter A :	660 feet from the Nor	th line and 66	feet from the	East line
Section 16	Township 6S R  11. Elevation (Show whether D		NMPM Chaves	County
4110'GR				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN	NTENTION TO:	SUBSI	EQUENT REPOR	T OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		RING CASING
TEMPORARILY ABANDON DULL OR ALTER CASING	CHANGE PLANS   MULTIPLE COMPL	COMMENCE DRILL CASING/CEMENT J	<del></del>	JA L
DOWNHOLE COMMINGLE			_	
OTHER:		OTHER: Name Cha		
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.	,		,	
Former Wellname: Biplane Unit #	l			
New Wellname: Biplane BNZ State Com #1				
Effective 2/16/09				
Spud Date:	Rig Release I	Date:		
<u> </u>				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE (	TITLE R	egulatory Compliance S	upervisor DATE	February 5, 2009
Type or print name Tina Hue For State Use Only	erta E-mail address: tina	nh@yatespetroleum.com	n PHONE:5	75-748-4168
	<b>Acce</b> pted	for record	DATE	
APPROVED BY: Conditions of Approval (if any):	TITLE NMC	OCD	DATE	