

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

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

WELL API NO.

30-15-32675

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

**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, Artesia, New Mexico 88210

4. Well Location

Unit Letter: O : 660 feet from the South line and 1330 feet from the East line  
Section 36 Township 16S Range 26E NMPM County Eddy

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

3863'

7. Lease Name or Unit Agreement Name:

Refuge BCR State

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DEC - 9 2003

8. Well No.

1

OCD-ARTESIA

9. Pool name or Wildcat

Undesignated Riverside Morrow

**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: Change of Pits ☒

**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 recompletion.

Please be advised we will be using a closed loop mud system instead of conventional earthen pits.  
Thank You,

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

SIGNATURE Debbie Cowan TITLE Regulatory Agent/Land Department DATE 12/08/03

Type or print name Cy Cowan debbiec@ypcnm.com Telephone No. (505) 748-4364

(This space for State use)

APPROVED BY Jim W. Gunn TITLE District Supervisor DATE DEC 11 2003

Conditions of approval, if any: