## Submit 3 Copies to Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 88240 District II

## State of New Mexico **Energy, Minerals and Natural Resources**

e N	ON	Form C-103
		Revised March 25, 1999
ELL API NO.	1	
0-005-63316		

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30-005-63316
5. Indicate Type of Lease
STATE X FEE

0 811 South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 2040 South Pacheco, Santa Fe, NM 87505 L-6811-2 7. Lease Name or Unit Agreement Name: 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.) Horizon "AWH" State 1. Type of Well: Oil Well 🔲 Gas Well Other 8. Well No. 2. Name of Operator Yates Petroleum Corporation 9. Pool name or Wildcat 3. Address of Operator Undes. Foor Ranch; Pre-Permian 105 South Fourth Street, Artesia, New Mexico 88210 4. Well Location North & c 7; line and 660' feet from the East line · 1200' feet from the Unit Letter: A **NMPM** County Chaves Section Township 9S Range 26E 16 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: **NOTICE OF INTENTION TO: ALTERING CASING PLUG AND ABANDON** REMEDIAL WORK PERFORM REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND **CHANGE PLANS TEMPORARILY ABANDON ABANDONMENT CASING TEST AND PULL OR ALTER CASING** MULTIPLE **CEMENT JOB** COMPLETION OTHER: 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. Yates Petroleum Corporation wishes to change the total depth from 6040' to 6365' and drill to the Basement-Granite formation. I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 12/18/00 TITLE Regulatory Agent **SIGNATURE** 

(505) 748-1471 Telephone No. Type or print name Pat Perez (This space for State use)

APPROVED BY

Conditions of approval, if any: