

## Office

## 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

2040 South Pacheco, Santa Fe, NM 87505

## State of New Mexico

## Energy, Minerals and Natural Resources

## OIL CONSERVATION DIVISION

2040 South Pacheco St.

Santa Fe, NM 87505

## Form C-103

Revised March 25, 1999

## WELL API NO.

30-005-63424

## 5. Indicate Type of Lease

STATE ☒ FEE ☐

## 6. State Oil &amp; Gas Lease No.

L-4283

## 7. Lease Name or Unit Agreement Name:

Cottonwood Ranch "MK" State

## 8. Well No.

7

## 9. Pool name or Wildcat

Wildcat Basement

## 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: L : 1980 feet from the South line and 660 feet from the West line  
Section 36 Township 6S Range 25E NMPM County Chaves

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

3711'

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: Extend APD ☒

## 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.

Yates Petroleum Corporation wishes to extend the captioned well's APD expiration date for one (1) year to October 1, 2003  
Thank you.

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

TITLE Regulatory Technician DATE 09/03/02

Type or print name Robert Asher

Telephone No. (505) 748-4364

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

SEP 20 2002

APPROVED BY DATE

Conditions of approval, if any: