Form C-103 State of New Mexico Submit 3 Copies to Appropriate District Office Revised March 25, 1999 **Energy, Minerals and Natural Resources** District I WELL API NO 1625 N. French Dr., Hobbs, NM 88240 District II 30-005-63431 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco St. STATE FEE X 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 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 (2)142) FOLOSICH PROPOSALS.) 1. Type of Well: Sacra "SA" Com. Gas Well X Oil Well Other 2. Name of Operator 8. Well No. Yates Petroleum Corporation 20 3. Address of Operator 9. Pool name or Wildcat 105 South Fourth Street, Artesia, New Mexico 88210 Cottonwood Ranch Penn 4. Well Location . · 1980' feet from the tine and 1980' feet from the East line Unit-Letter: J Section County Chaves 35 Township 6S 25E **NMPM** Range 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: **PLUG AND ABANDON REMEDIAL WORK ALTERING CASING** PERFORM REMEDIAL WORK **TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PLUG AND ABANDONMENT PULL OR ALTER CASING MULTIPLE CASING TEST AND** COMPLETION **CEMENT JOB** OTHER: Extend APD X 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 22, 2003. Thank you. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

TITLE

TTLE

ORIGINAL SIGNED BY TIM W. GUM

DISTRICT II SUPERVISOR

Regulatory Technician

DATE

Telephone No.

09/16/02

(505) 748-4364

SEP 2 3 2002

Conditions of approval, if any:

(This space for State reset)

Type or print name Robert Asher

SIGNATURE