

CIST
AP

DISTRICT I
P.O. Box 1988, Hobbs, NM 88240

DISTRICT II
P.O. Drawer 1DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-005-63481

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
VA-2066

7. Lease Name or Unit Agreement Name
Dallas "AUE" State Com.

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 S. 4th Street, Artesia, NM 88210

4. Well Location

Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line
Section 34 Township 9S Range 26E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3.805'

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 ☐
OTHER: ☐

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 date, including estimated date of starting any proposed work) SEE RULE 1103.

Yates Petroleum Corporation respectfully requests permission to make the following changes to the APD for this well.

Change the TOC from 5,000' to 4,000'. This puts the TOC at 500' above the Abo.

Verbal permission for this Sundry was given by Bryan Arrant, OCD on 11/4/02.

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

SIGNATURE Jeremiah Mullen TITLE Drilling Engineer Asst. DATE 11/04/02

TYPE OR PRINT NAME Jeremiah Mullen TELEPHONE NO. (505)-748-4378

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Record