Submit 3 Copies To Appropriate District Office <u>District I</u>	State of New Mexico Energy, Minerals and Natural Resource	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u>	OIL CONSERVATION DIVISIO 1220 South St. Francis Dr. Santa Fe, NM 87505	5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPO	TICES AND REPORTS ON WELLS DSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO ICATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Other	7. Lease Name or Unit Agreement Name Judson AUU State Com 8. Well Number
Name of Operator Yates Petroleum Corporat Address of Operator 105 S. 4 th Street, Artesia,	tion	9. OGRID Number 025575 10. Pool name or Wildcat Wildcat Permo Penn
4. Well Location Unit Letter O: Section 26	660 feet from the South line and Township 10S Range 3	1 1980 feet from the East line 4E NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4171' GR Pit or Below-grade Tank Application or Closure		
Pit type Depth to Groundwat	ter Distance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF II PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	PLUG AND ABANDON ☐ REMEDIA CHANGE PLANS ☐ COMMEN	SUBSEQUENT REPORT OF: LL WORK
OTHER:	□ OTHER:	Name Change
13. 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 requests to change the wellname as follows:		
From: Judson AUU State Com #2 To: Judson AUU State #2	2000	Contract to the second
OPER. O	GRID NO. 25575	
PM OPER	77 (4) 35335	(S) 26 (S)
POO L CC		(2) (2) (3) (4) (5)
EFF. DAT		Vers. 307
API NO.	30-025-36886	555 TTO1 8813
Elizabeth San Carlot Barket Sa	i a sugar de Bregoria	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.		
SIGNATURE TITLE Regulatory Compliance Technician DATE 12-22-05		
Type or print name Stormi I For State Use Only		Mypcnm.com Telephone No. 505-748-1471
APPROVED BY: Conditions of Approval (if any):	TITLE PEIR	DLEUM ENGINEER DATJAN 0 4 2006