

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

|                                                                                                                                                                                                                       |  |                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)         |  | WELL API NO.<br>30-025-37438 ✓                                                                      |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>                                                                                        |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Yates Petroleum Corporation ✓                                                                                                                                                                  |  | 6. State Oil & Gas Lease No.<br>V-6088                                                              |
| 3. Address of Operator<br>105 S. 4 <sup>th</sup> Street, Artesia, NM 88210                                                                                                                                            |  | 7. Lease Name or Unit Agreement Name<br>Van Dyke BGU State ✓                                        |
| 4. Well Location<br>Unit Letter <u>O</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>East</u> line<br>Section <u>17</u> Township <u>10S</u> Range <u>33E</u> NMPM <u>Lea</u> County |  | 8. Well Number<br><u>1</u> ✓                                                                        |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4191' GR                                                                                                                                                        |  | 9. OGRID Number<br>025575 ✓                                                                         |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>                                                                                                                      |  |                                                                                                     |
| Pit type _____ Depth to Groundwater _____ 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

|                                                |                                           |                                                        |                                          |
|------------------------------------------------|-------------------------------------------|--------------------------------------------------------|------------------------------------------|
| <b>NOTICE OF INTENTION TO:</b>                 |                                           | <b>SUBSEQUENT REPORT OF:</b>                           |                                          |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                 | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>       | P & A <input type="checkbox"/>           |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>             |                                          |
| OTHER: <input type="checkbox"/>                |                                           | OTHER: Name Change <input checked="" type="checkbox"/> |                                          |

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.

Effective January 20, 2008

Former Wellname: Van Dyke State Unit #1

New Wellname: Van Dyke BGU State #1

OPER. OGRID NO. 25575  
PROPERTY NO. 37085  
POOL CODE 13350  
EFF. DATE 1/20/08  
API NO. 30-025-37438

**RECEIVED**

FEB 29 2008

**HOBBS OCD**

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 Stormi Davis TITLE Regulatory Compliance Technician DATE 2-27-08

Type or print name Stormi Davis E-mail address: stormid@ypcnm.com Telephone No. 575-748-1471

**For State Use Only**

APPROVED BY: Chris Williams OC DISTRICT SUPERVISOR/GENERAL MANAGER  
Conditions of Approval (if any): \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAR 26 2008