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 30-025-00012 **OIL CONSERVATION DIVISION** 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco St. STATE X FEE 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 VA-2155 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 C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Sohio AVR State Gas Well Oil Well X Other 2. Name of Operator 8. Well No. Yates Petroleum Corporation 3. Address of Operator 9. Pool name or Wildcat Wildcat Devonian 105 South Fourth Street, Artesia, New Mexico 88210 4. Well Location · 1980' feet from the line and 1980' feet from the West line Unit Letter: K South County Lea Section Township 10S Range 32E **NMPM** 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4360' 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: **ALTERING CASING** PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS **PLUG AND TEMPORARILY ABANDON CHANGE PLANS ABANDONMENT MULTIPLE CASING TEST AND PULL OR ALTER CASING** COMPLETION **CEMENT JOB** X OTHER: OTHER: Extend APD 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 July §, 2002.

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

SIGNATURE TITLE Regulatory Technician DATE 06/06/01

Type or print name Darlene Chavarria Telephone No. (505) 748-1471

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APPROVED BY TITLE Drig. Signed DATE

Conditions of approval, if any:

Paul Kongeology

Thank you.