

State of New Mexico
Energy, Minerals and Natural ResourcesForm C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION

2040 South Pacheco St.
Santa Fe, NM 87505

WELL API NO.

30-025-35250

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

V-5912

7. Lease Name or Unit Agreement Name:

Chevy "AWV" State Com

8. Well No.

1

9. Pool name or Wildcat

Wildcat Mississippian

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 South Fourth Street, Artesia, New Mexico 88210

4. Well Location

Unit Letter: K : 1650 feet from the South line 1650 feet from the West line
Section 13 Township 15S Range 34E NMPM County Lea

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

4056'

11. 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 ☐ MULTIPLE COMPLETION ☐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 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 move this well from its approved location of 1100' FSL and 1600' FWL to a new location of 1650' FSL and 1650' FWL.

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

SIGNATURE Clifton R. May TITLE Regulatory Agent DATE 01/12/01Type or print name Clifton R. May Telephone No. (505) 748-1471

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any: