Submit 3 Copies to Appropriate District State of New Mexico Form C-103 Office District 1 Energy, Minerals and Natural Resources Revised March 25, 1999 1625 N. French Dr., Hobbs, NM 88240 WELL API NO. District II 30-025-35326 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco St. 1000 Rio Brazos Rd., Aztec, NM 87410 STATE X FEE [ District IV Santa Fe, NM 87505 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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: Bart "AXL" State Oil Well Gas Well Other 2. Name of Operator 8. Well No. Yates Petroleum Corporation 3. Address of Operator 9. Pool name or Wildcat 105 South Fourth Street, Artesia, New Mexico 88210 Wildcat 4. Well Location Unit Letter: C : 660 feet from the North line and 1650 feet from the Section Township 15S Range NMPM County Lea 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4054' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** X COMMENCE DRILLING OPNS PLUG AND **ABANDONMENT PULL OR ALTER CASING** MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: 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 change the dedicated acres for this well from the west half to the north half of Section 24, T15S. R34E. A new C-102 Plat is attached. Also at this time, Yates wishes to request that the expiration date for the ADP be extended for one (1) year to January 3, 2003. Yates wishes to change the name of this well from the Bart "AXL" State Com. #1 to the Bart "AXL" State #1. I hereby certify that the information above is true and complete to the best of my knowledge and belief. UR. May **SIGNATURE** TITLE Regulatory Agent Type or print name Clifton R. May Telephone No. (This space for State use)

TITLE

DATE

APPROVED BY

Conditions of approval, if any: