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			-	\overline{C}	SIDO		
Submit 3 Copies to Appropriate District Office		e of New Mexi	· ·	· · ·	MAY.	Form C-	
District I	Energy, Mine	rals and Natur	al Resources			Revised March 25,	1999
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. V				
District II OIL CONSERVATION DIVISION District III 2040 South Pacheco St.				30-005-63277 5. Indicate Type of Lease			
<u>District IV</u> 2040 South Pacheco, Santa Fe, NM 87505				6. State Unl &	Gas Lease No	•	
SUNDRY NOTICE	S AND DEIDO'	DTS ON WEI		7. Lease Name	or Unit Agra	amont Nama.	
(DO NOT USE THIS FORM FOR PROP		1		.1	of Out Agre	CINCID HAMIN.	·
DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)		4				*	105
1. Type of Well:				Caudill " RZ"			ملاً: ناہ
	X Other					RECEIVED	
2. Name of Operator	/	· · ·		8. Well No.		C.D - ARTESTA	
Yates Petroleum Corporation	r	· . ·		8	- O		Λ^{Λ}
3. Address of Operator	, 	1		9. Pool name o	w Wildoot		<u> </u>
105 South Fourth Street, Artesia,	New Merrice 992	10	2	1	· · · · · · · · · · · · · · · · · · ·	Storer Alex	
4. Well Location	New Mexico 8021	10	· · ·	Pecos Slope A	.00		·
Unit Letter: <u>N : 660</u>)' feet from	the South	line and	1500' 1	leet from the	West	line
Section 8	Townsł			<u></u>	County (une
Section 8		vation (Show wh	<u> </u>		County (Jnaves	
	10. 1510		3680'	n1, 0n, en.,			
11 Charles		to Indianta		it D			
	Appropriate Bo			· •			
NOTICE OF IN	TENTION TO:			SUBSEQUEN	I REPORT	OF:	
	PLUG AND ABAN		REMEDIAL WO	RK] ALTE	RING CASING	
	CHANGE PLANS		COMMENCE DI			AND	[
PULL OR ALTER CASING	MULTIPLE		CASING TEST				
	COMPLETION		CEMENT JOB	L	J		
		X	OTUED.	1			Г
OTHER: Extend APD	······································		OTHER:				_L
12. Describe proposed or complete	ed operations. (C	learly state all p	ertinent details,	and give pertiner	it dates, inclue	ding estimated o	late
of starting any proposed wor	k). SEE RULE 1	103. For Multip	le Completions:	Attach wellbore	diagram of p	roposed comple	tion
or recompletion.	•			•			
							•
				•			
Yates Petroleum Corporation wish	nes to extend the c	captioned well's	APD expiration of	date for one (1) ye	ar to August 3	1, 2002.	
Thank you.				1			
	r.		•				
· · ·				-			
· · · · · · · · · · · · · · · · · · ·	·			•	·		
I hereby certify that the informat	ion above is true a	and complete to	the best of my k	nowledge and be	lief.	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE Darlene Ch		TITLE	Regulatory	Technician	ĎATE	06/13/01	
· · · · · · ·		······································	regulatory				
Type or print name Darlene Chav	arria			<u>T</u> i	elephone No.	(505) 748-14	171
(This space for State use)	/ ORIGINAL SU	gned by tim	W. gum	ł		111M 9 8 9	2001
APPROVED BY	DISTRICT II	SUPERINE R		,	DATE	JUN 262	.001
Conditions of approval, if any:				······			
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