

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.

**SUBMIT IN TRIPLICATE**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. Saguaro AGS Federal Com. #15
2. Name of Operator YATES PETROLEUM CORPORATION	9. API Well No. 115-27711
3. Address and Telephone No. 105 South Fourth Street, Artesia, New Mexico 88210 (505) 748-1471	10. Field and Pool, or Exploratory Area South Dagger Draw
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1780' FNL and 660' FWL Section 23, T20S-R24E	11. County or Parish, State Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>EXTEND APD</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*  
Yates Petroleum Corporation wishes to extend the above caption well's APD expiration date for one (1) year to November 25, 1998.

Thank you.

**APPROVED FOR 12 MONTH PERIOD  
ENDING NOV 25 1998**

14. I hereby certify that the foregoing is true and correct.	
Signed <u>Ken Bergh</u>	Title <u>Landman</u>
(This space for Federal or State office use)	Date <u>October 7, 1997</u>
Approved by <u>ORIG. SGD. DAVID H. GLASS</u>	Title _____
Conditions of approval, if any:	Date <u>OCT 27 1997</u>